		CTED (if checked)		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents	OMB No. 1545-0115	
		\$ 2 Royalties	2014	Miscellaneous Income
		\$	Form 1099-MISC	
		3 Other income	4 Federal income tax withhe	d Copy I
		\$	\$	For Recipien
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care paymer	ts
		\$	\$	
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu dividends or interest	This is important ta information and i being furnished to the Internal Revenue
Street address (including apt. no.)		\$	\$	Service. If you are
City or town, state or province, country, and ZIP or foreign postal code		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale ►	10 Crop insurance proceeds	required to file a return, a negligence penalty or othe sanction may be
		11	12	imposed on you this income i taxable and the IR
Account number (see instructions)		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney \$	determines that has not bee reported
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
122 222.0 1007.1 00.0		\$		\$
\$	\$	\$	 	

Form 1099-MISC