

1099-MISC Income

ORG8

MISCELLANEOUS INCOME

Attach all copies of 1099-MISC forms here.

Box	Description	Payer 1	Payer 2	Payer 3
	Check if spouse .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Check if you did not receive income from this payer in 2011 .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Payer's name .....			
	Payer's federal identification number <b>or</b> .....			
	Payer's social security number .....			
1	Rents .....			
2	Royalties .....			
3	Other income .....			
4	Federal income tax withheld .....			
5	Fishing boat proceeds .....			
6	Medical/health care payments .....			
7	Nonemployee compensation .....			
8	Substitute payments .....			
10	Crop insurance proceeds .....			
13	Excess golden parachute payments .....			
14	Gross proceeds paid to an attorney .....			
15a	Section 409A deferrals .....			
15b	Section 409A income .....			
16	State tax withheld – 1st state .....			
17	State name – two letters – 1st state .....			
	Payer's state number – 1st state .....			
18	State income – 1st state .....			
16	State tax withheld – 2nd state .....			
17	State name – two letters – 2nd state .....			
	Payer's state number – 2nd state .....			
18	State income – 2nd state .....			