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|--|--|--|--|---|---------------------------------|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. PARSIPPANY-TROY HILLS 1001 PARSIPPANY BLVD PARSIPPANY NJ 07054 | | Rents \$ | OMB No. 1545-0115 2015 | | Miscellaneous Income |
| | | 2 Royalties \$ | Form 1099-MISC | | |
| | | 3 Other income \$ | 4 Federal income tax withheld \$ | | Copy A |
| PAYER'S federal identification number 22-6002190 | RECIPIENT'S identification number REDACTED COPY PURSUANT TO OPRA | 5 Fishing boat proceeds \$ | 6 Medical and health care payments \$ | | |
| RECIPIENT'S name INGLESINO, PEARLMAN, WYCISKALA, T | | 7 Nonemployee compensation \$ 601,466.82 | 8 Substitute payments in lieu of dividends or interest | | File with Form 1096. |
| Street address (including apt. no.) 600 PARSIPPANY RD | | 9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | 10 Crop insurance proceeds | | |
| City or town, state or province, country, and ZIP or foreign postal code PARSIPPANY, NJ 07054 | | 11 | 12 | | |
| Account number (see instructions) | FATCA filing requirement <input type="checkbox"/> | 2nd TIN not. <input type="checkbox"/> | 13 Excess golden parachute payments \$ | 14 Gross proceeds paid to an attorney \$ | |
| 15a Section 409A deferrals \$ | 15b Section 409A income \$ | | 16 State tax withheld \$ | 17 State/Payer's state no. | 18 State income \$ |