

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		OMB No. 1545-0116 Form 1099-NEC (Rev. April 2025) For calendar year 2025		Nonemployee Compensation
CAPITAL AUTOMOTIVE INC 5605 77 CENTER DR STE 270 CHARLOTTE, NC 28217 75-2986801				
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation		Copy B For Recipient This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		\$ 71820		
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> N		
		3 Excess golden parachute payments \$ 5500		
		4 Federal income tax withheld \$ 350		
Not Real Person		5 State tax withheld \$ 1200.47	6 State/Payer's state no. 47-456	7 State income \$ 567.89
Account number (see instructions) 56789		\$ 456	36-356	\$ 12567.35

Form **1099-NEC** (Rev. 4-2025) (keep for your records) www.irs.gov/Form1099NEC Department of the Treasury - Internal Revenue Service

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		\$ 71820		
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> N		
		3 Excess golden parachute payments \$ 5600		
		4 Federal income tax withheld \$ 700		
Not Real Person 1924 Sharon Lane Charlotte, NC 28211		5 State tax withheld \$ 300.47	6 State/Payer's state no. 47-456	7 State income \$ 667.89
Account number (see instructions) 56789		\$ 356	36-356	\$ 12667.35

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CAPITAL AUTOMOTIVE INC 5605 77 CENTER DR STE 270 CHARLOTTE, NC 28217 75-2986801				
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation		Copy B For Recipient This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		\$ N		
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> N		
		3 Excess golden parachute payments \$ 5700		
		4 Federal income tax withheld \$ 1050		
Mustang Insurance Agency Inc 1924 Sharon Lane Charlotte, NC 28211 56789		5 State tax withheld \$ 1400.47	6 State/Payer's state no. 47-456	7 State income \$ 12767.35
Account number (see instructions)		\$ 556	36-356	\$ 12767.35

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