

7171

☐ VOID☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. <b>Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555</b>		OMB No. 1545-0116 <b>2020</b> Form <b>1099-NEC</b>		<b>Nonemployee Compensation</b>  <b>Copy A</b> <b>For Internal Revenue Service Center</b>  <b>File with Form 1096.</b>  For Privacy Act and Paperwork Reduction Act Notice, see the <b>2020 General Instructions for Certain Information Returns.</b>	
1 Nonemployee compensation <b>\$ 1,234.56</b>		2			
PAYER'S TIN <b>XX-XXXXXXX</b>	RECIPIENT'S TIN <b>YY-YYYYYYY1</b>	3			
RECIPIENT'S name <b>A Very Long Recipient Name To Test Width</b>		4 Federal income tax withheld <b>\$</b>			
Street address (including apt. no.) <b>Street Address Line 1 Line 2</b>		5			
City or town, state or province, country, and ZIP or foreign postal code <b>Long Name for a City, State 11111-1111</b>		6			
FATCA filing requirement <input type="checkbox"/>		7		8	
Account number (see instructions) <b>XXXXXX</b>	2nd TIN not. <input type="checkbox"/>	5 State tax withheld <b>\$</b>	6 State/Payer's state no. <b>\$</b>	7 State income <b>\$</b>	

Form **1099-NEC**

Cat. No. 72590N

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

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1 Nonemployee compensation <b>\$ 999.00</b>		2			
PAYER'S TIN <b>XX-XXXXXXX</b>	RECIPIENT'S TIN <b>YY-YYYYYYY2</b>	3			
RECIPIENT'S name <b>Recipient Name that is even longer than the previous</b>		4 Federal income tax withheld <b>\$</b>			
Street address (including apt. no.) <b>Street Address Line 1</b>		5			
City or town, state or province, country, and ZIP or foreign postal code <b>City, State 11111</b>		6			
FATCA filing requirement <input type="checkbox"/>		7		8	
Account number (see instructions) <b>XXXXXX</b>	2nd TIN not. <input type="checkbox"/>	5 State tax withheld <b>\$</b>	6 State/Payer's state no. <b>\$</b>	7 State income <b>\$</b>	

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1 Nonemployee compensation \$ <b>9,875,383.39</b>		2			
PAYER'S TIN <b>XX-XXXXXXX</b>	RECIPIENT'S TIN <b>YY-YYYYYYY3</b>	3			
RECIPIENT'S name <b>Recipient Name</b>		4 Federal income tax withheld \$			
Street address (including apt. no.) <b>Street Address Line 1</b>		5			
City or town, state or province, country, and ZIP or foreign postal code <b>City, State 11111</b>		6			
FATCA filing requirement <input type="checkbox"/>		7		8	
Account number (see instructions) <b>XXXXX</b>	2nd TIN not. <input type="checkbox"/>	5 State tax withheld \$	6 State/Payer's state no. \$	7 State income \$	

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1 Nonemployee compensation \$		2			
PAYER'S TIN	RECIPIENT'S TIN	3			
RECIPIENT'S name		4 Federal income tax withheld \$			
Street address (including apt. no.)		5			
City or town, state or province, country, and ZIP or foreign postal code		6			
FATCA filing requirement <input type="checkbox"/>		7		8	
Account number (see instructions)	2nd TIN not. <input type="checkbox"/>	5 State tax withheld \$	6 State/Payer's state no. \$	7 State income \$	

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