		CTED (if abooked)		
PAYER'S name, street address, city of or foreign postal code, and telephone Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555	or town, state or province, country, ZIP	CTED (if checked)	OMB No. 1545-0116 2020 Form 1099-NEC	Nonemployee Compensation
PAYER'S TIN XX-XXXXXXX	RECIPIENT'S TIN YY-YYYYYY3	1 Nonemployee compensat \$ 9,875,383.39 2	ion	Copy B For Recipient
RECIPIENT'S name Recipient Name Street address (including apt. no.) Street Address Line	1 Line 2	Federal income tax withher	eld	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
City or town, state or province, count City, State 11111	ry, and ZIP or foreign postal code FATCA filing requirement			sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Account number (see instructions) XXXXX		5 State tax withheld \$	6 State/Payer's state no.	7 State income \$
,		www.irs.gov/Form1099NE CTED (if checked)	C Department of the Tre	easury - Internal Revenue Service
PAYER'S name, street address, city of or foreign postal code, and telephone Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555	or town, state or province, country, ZIP no.		20 20 Form 1099-NEC	Nonemployee Compensation
l ` ′		1 Nonemployee compensat	ion	Copy B

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555			OMB No. 1545-0116 2020 Form 1099-NEC				Nonemployee Compensation		
				1 Nonemployee compensation \$ 999.00			Copy B		
PAYER'S TIN XX-XXXXXXX	RECIPIENT'S TIN	2	2	399.00			For Recipient		
RECIPIENT'S name Recipient Name			3				This is important tax information and is being furnished to		
Street address (including apt. no.) Street Address Line 1			4 Federal income tax withheld \$				the IRS. If you are required to file a return, a negligence penalty or other sanction may be		
City or town, state or province, country, and ZIP or foreign postal code City, State 11111							imposed on you if this income is taxable and the IRS determines that it has not been reported.		
		FATCA filing requirement							
Account number (see instructions) XXXXX			5 S	tate tax withheld	6 State/Payer's state no.		State income		
			\$			\$	+		
			\$			\$			