

7171

☐ VOID☐ CORRECTED

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 <b>2021</b> Form <b>1099-NEC</b>		<b>Nonemployee Compensation</b>
PAYER'S TIN XX-XXXXXXX	RECIPIENT'S TIN YY-YYYYYYY3	1 Nonemployee compensation \$ 9,875,383.39		
RECIPIENT'S name Recipient Name		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>		<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>2021</b> General Instructions for Certain Information Returns.
Street address (including apt. no.) Street Address Line 1 Line 2		3		
City or town, state or province, country, and ZIP or foreign postal code City, State 11111		4 Federal income tax withheld \$		
Account number (see instructions) XXXXX	2nd TIN not. <input type="checkbox"/>	5 State tax withheld \$	6 State/Payer's state no. \$	
		7 State income \$		

Form **1099-NEC**

Cat. No. 72590N

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

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PAYER'S TIN XX-XXXXXXX	RECIPIENT'S TIN YY-YYYYYYY2	1 Nonemployee compensation \$ 999.00		
RECIPIENT'S name Recipient Name		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>		<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>2021</b> General Instructions for Certain Information Returns.
Street address (including apt. no.) Street Address Line 1		3		
City or town, state or province, country, and ZIP or foreign postal code City, State 11111		4 Federal income tax withheld \$		
Account number (see instructions) XXXXX	2nd TIN not. <input type="checkbox"/>	5 State tax withheld \$	6 State/Payer's state no. \$	
		7 State income \$		

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