

Amazon Payments, Inc.
PO Box 80683
Seattle, WA 98108-0683

GLUTEN FREE YOU AND ME LLC
2680 BILLINGSLEY RD
COLUMBUS, OH 43235

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Amazon Payments, Inc. PO Box 80683 Seattle, WA 98108-0683 (206) 266-2595 1099@amazon.com		FILER'S federal identification no. 20-2936165	OMB No. 1545-2205 2016 Form 1099-K	Payment Card and Third Party Network Transactions Copy B For Payee This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
		PAYEE'S taxpayer identification no. XX-XXX3493		
		1a Gross amount of payment card/third party network transactions \$ 433,625.38		
1b Card Not Present transactions \$ 433,625.38	2 Merchant category code			
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input checked="" type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>	Check to indicate transactions reported are: Payment card <input type="checkbox"/> Third party network <input checked="" type="checkbox"/>	3 Number of payment transactions 31,093	4 Federal income tax withheld \$ 0.00	
PAYEE'S name GLUTEN FREE YOU AND ME LLC Street address (including apt. no.) 2680 BILLINGSLEY RD City or town, state or province, country, and ZIP or foreign postal code COLUMBUS, OH, 43235 PSE'S name and telephone number		5a January \$	5b February \$	
		5c March \$	5d April \$	
		5e May \$ 9,884.24	5f June \$ 42,297.39	
		5g July \$ 54,744.81	5h August \$ 59,452.29	
		5i September \$ 63,528.14	5j October \$ 62,310.41	
		5k November \$ 61,242.88	5l December \$ 80,165.22	
		6 State	7 State identification no.	
		8 State income tax withheld \$		
Account number (see instructions) MAT:A205PU1TVJGSF8				

Form **1099-K**

(Keep for your records)

www.irs.gov/form1099k

Department of the Treasury - Internal Revenue Service

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FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Amazon Payments, Inc. PO Box 80683 Seattle, WA 98108-0683 (206) 266-2595 1099@amazon.com		FILER'S federal identification no. 20-2936165 PAYEE'S taxpayer identification no. XX-XXX3493 1a Gross amount of payment card/third party network transactions \$ 433,625.38		OMB No. 1545-2205 <div style="font-size: 2em; font-weight: bold; text-align: center;">2016</div> Form 1099-K		Payment Card and Third Party Network Transactions	
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PAYEE'S name GLUTEN FREE YOU AND ME LLC Street address (including apt. no.) 2680 BILLINGSLEY RD City or town, state or province, country, and ZIP or foreign postal code COLUMBUS, OH, 43235		3 Number of payment transactions 31,093		4 Federal income tax withheld \$ 0.00		Copy 2 To be filed with the recipient's state income tax return, when required.	
PSE'S name and telephone number		5a January \$		5b February \$			
Account number (see instructions) MAT:A205PU1TVJGSF8		5c March \$		5d April \$			
		5e May \$ 9,884.24		5f June \$ 42,297.39			
		5g July \$ 54,744.81		5h August \$ 59,452.29			
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		5k November \$ 61,242.88		5l December \$ 80,165.22			
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				8 State income tax withheld \$			

Form **1099-K**

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Department of the Treasury - Internal Revenue Service

Instructions for Payee

You have received this form because you have either: (a) accepted payment cards for payments, or (b) received payments through a third party network that exceeded \$20,000 in gross total reportable transactions and the aggregate number of those transactions exceeded 200 for the calendar year. Merchant acquirers and third party settlement organizations, as payment settlement entities (PSE), must report the proceeds of payment card and third party network transactions made to you on Form 1099-K under Internal Revenue Code section 6050W. The PSE may have contracted with an electronic payment facilitator (EPF) or other third party payer to make payments to you.

If you have questions about the amounts reported on this form, contact the FILER whose information is shown in the upper left corner on the front of this form. If you do not recognize the FILER shown in the upper left corner of the form, contact the PSE whose name and phone number are shown in the lower left corner of the form above your account number.

See the separate instructions for your income tax return for using the information reported on this form.

Payee's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete identification number to the IRS.

Account number. May show an account number or other unique number the PSE assigned to distinguish your account.

Box 1a. Shows the aggregate gross amount of payment card/third party network transactions made to you through the PSE during the calendar year.

Box 1b. May show the aggregate gross amount of all reportable payment transactions made to you through the PSE during the calendar year where the card was not present at the time of the transaction or the card number was keyed into the terminal. Typically, this relates to online sales, phone sales, or catalogue sales. If the box for third party network is checked, or if these are third party network transactions, card not present transactions will not be reported.

Box 2. Shows the merchant category code used for payment card/ third party network transactions (if available) reported on this form.

Box 3. Shows the number of payment transactions (not including refund transactions) processed through the payment card/third party network.

Box 4. Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your taxpayer identification number (TIN) or you did not furnish the correct TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification and Publication 505, Tax Withholding and Estimated Tax, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5a-5l. Shows the gross amount of payment card/third party network transactions made to you for each month of the calendar year.

Boxes 6-8. Shows state and local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-K and its instructions, such as legislation enacted after they were published, go to www.irs.gov/form1099k.