

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  <b>Raynor, Larkin and Marks</b> <b>06886 Abram Ramp</b> <b>East Aliceborough, NC 28474</b> <b>555-867-5309</b>		FILER'S TIN <b>00-0171813</b>	OMB No. 1545-2205			
		PAYEE'S TIN <b>000-15-8486</b>	Form <b>1099-K</b>			
		1a Gross amount of payment card/third party network transactions \$ <b>200.00</b>	(Rev. March 2024)			
		1b Card Not Present transactions \$ <b>300.00</b>	For calendar year <b>2025</b>			
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input checked="" type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input checked="" type="checkbox"/>		Check to indicate transactions reported are: Payment card <input checked="" type="checkbox"/> Third party network <input checked="" type="checkbox"/>		2 Merchant category code <b>merchantCategoryCode</b>	<b>Copy B For Payee</b>  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 taxable income results from this transaction and the IRS determines that it has not been reported.	
PAYEE'S name  <b>Daren Satterfield</b>  Street address (including apt. no.)  <b>56760 Ondricka Village</b>  City or town, state or province, country, and ZIP or foreign postal code <b>Port Antoneton, FL 41025</b>		3 Number of payment transactions <b>400.00</b>	4 Federal income tax withheld \$ <b>500.00</b>			
PSE'S name and telephone number		5a January \$	5b February \$			
		5c March \$	5d April \$			
		5e May \$	5f June \$			
		5g July \$	5h August \$			
		5i September \$	5j October \$			
		5k November \$	5l December \$			
		6 State <b>AA</b>		7 State identification no. <b>15-298164</b>		
		8 State income tax withheld \$ <b>700.00</b>				
Account number (see instructions)  <b>961-33965-3</b>		8 State income tax withheld \$ <b>700.00</b>				