

FORM NEC7154-4 4PT/NECTCM4

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7171  VOID  CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		OMB No. 1545-0116 Form <b>1099-NEC</b> (Rev. January 2022) For calendar year		<b>Nonemployee Compensation</b>	
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation \$			
RECIPIENT'S 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>current General Instructions for Certain Information Returns.</b>	
Street address (including apt. no.)		3			
City or town, state or province, country, and ZIP or foreign postal code		4 Federal income tax withheld \$		7 State income \$	
Account number (see instructions)		5 State tax withheld \$	6 State/Payer's state no.		
2nd TIN not.		\$		\$	

Form **1099-NEC** (Rev. 1-2022) 41-0852411 www.irs.gov/Form1099NEC Department of the Treasury - Internal Revenue Service  
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