

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		Nonemployee Compensation	
		Form 1099-NEC (Rev. January 2022)			
		For calendar year 20__			
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation \$		Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.	
RECIPIENT'S name		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>			
Street address (including apt. no.)		3			
City or town, state or province, country, and ZIP or foreign postal code		4 Federal income tax withheld \$			
Account number (see instructions)		5 State tax withheld \$	6 State/Payer's state no.		7 State income \$
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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