

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<br><b>2021</b><br>Form <b>1099-NEC</b> |
| PAYER'S TIN   | RECIPIENT'S TIN |  |

**Nonemployee Compensation**

|  |                                       |   |
|--|---------------------------------------|---|
| 1 Nonemployee compensation<br>\$   |                                       | <b>Copy A</b><br><b>For Internal Revenue Service Center</b><br><b>File with Form 1096.</b><br>For Privacy Act and Paperwork Reduction Act Notice, see the <b>2021 General Instructions for Certain Information Returns.</b> |
| 2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> |                                       |   |
| 3  |                                       |   |
| 4 Federal income tax withheld<br>\$  |                                       |   |
| 5 State tax withheld   | 6 State/Payer's state no.             |   |
| 7 State income<br>\$   |                                       |   |
| Account number (see instructions)  | 2nd TIN not. <input type="checkbox"/> |   |

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| PAYER'S TIN   | RECIPIENT'S TIN |  |

**Nonemployee Compensation**

|  |                           |  |
|--|---------------------------|--|
| 1 Nonemployee compensation<br>\$   |                           | <b>Copy 1<br/>For State Tax<br/>Department</b> |
| 2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> |                           |  |
| 3  |                           |  |
| 4 Federal income tax withheld<br>\$  |                           |  |
| 5 State tax withheld   | 6 State/Payer's state no. |  |
| Account number (see instructions)  | 7 State income<br>\$      |  |

Form **1099-NEC**

[www.irs.gov/Form1099NEC](http://www.irs.gov/Form1099NEC)

Department of the Treasury - Internal Revenue Service

CORRECTED (if checked)

|   |  |                      |
|---|--|----------------------|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. |  | OMB No. 1545-0116    |
|   |  | <b>2021</b>          |
|   |  | Form <b>1099-NEC</b> |

**Nonemployee Compensation**

|  |                 |   |  |
|--|-----------------|---|--|
| PAYER'S TIN  | RECIPIENT'S TIN | <b>1</b> Nonemployee compensation<br>\$   | <b>Copy B<br/>For Recipient</b><br>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 this income is taxable and the IRS determines that it has not been reported. |
| RECIPIENT'S name   |                 | <b>2</b> Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> |  |
| Street address (including apt. no.)                                      |                 | <b>3</b>  |  |
| City or town, state or province, country, and ZIP or foreign postal code |                 | <b>4 Federal income tax withheld</b><br>\$  |  |
| Account number (see instructions)  |                 | <b>5</b> State tax withheld<br>\$<br>-----<br>\$  |  |
|  |                 | <b>6</b> State/Payer's state no.  | <b>7</b> State income<br>\$<br>-----<br>\$   |

Form **1099-NEC**

(keep for your records)

[www.irs.gov/Form1099NEC](http://www.irs.gov/Form1099NEC)

Department of the Treasury - Internal Revenue Service

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| PAYER'S TIN   | RECIPIENT'S TIN |  |

**Nonemployee Compensation**

|  |                           |  |
|--|---------------------------|--|
| 1 Nonemployee compensation<br>\$   |                           | <b>Copy 2</b><br><br><b>To be filed with recipient's state income tax return, when required.</b> |
| 2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> |                           |  |
| 3  |                           |  |
| 4 Federal income tax withheld<br>\$  |                           |  |
| 5 State tax withheld   | 6 State/Payer's state no. |  |
| 7 State income<br>\$   |                           |  |
| Account number (see instructions)  |                           |  |

Form **1099-NEC**

[www.irs.gov/Form1099NEC](http://www.irs.gov/Form1099NEC)

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| PAYER'S TIN   | RECIPIENT'S TIN |  |

**Nonemployee Compensation**

|  |  |                                       |  |  |  |   |
|--|--|---------------------------------------|--|--|--|---|
| PAYER'S TIN  |  | RECIPIENT'S TIN                       |  | 1 Nonemployee compensation<br>\$   |  | <p><b>Copy C<br/>For Payer</b></p> <p>For Privacy Act and Paperwork Reduction Act Notice, see the <b>2021 General Instructions for Certain Information Returns.</b></p> |
| 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<br>\$  |  |   |
| Account number (see instructions)  |  | 2nd TIN not. <input type="checkbox"/> |  | 5 State tax withheld   |  |   |
|  |  |                                       |  | 6 State/Payer's state no.  |  | 7 State income<br>\$  |

Form **1099-NEC**

[www.irs.gov/Form1099NEC](http://www.irs.gov/Form1099NEC)

Department of the Treasury - Internal Revenue Service