

☐ 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. April 2025)  For calendar year <b>2025</b>		<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"/>		
Street address (including apt. no.)		3 Excess golden parachute payments \$		
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 \$
		\$	\$	\$

Form 1099-NEC (Rev. 4-2025)

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

Department of the Treasury - Internal Revenue Service

**Copy 1  
For State Tax  
Department**

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		\$	\$	\$

**Copy B  
For Recipient**  
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

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