| | |] CORRE | CIEL | (if checked) | | |
|---|--|---------------------------|--|---|---------------------------|--|
| PAYER'S name, street address, city | | country, ZIP | | | OMB No. 1545-0116 | |
| or foreign postal code, and telephone no. | | | | | 2020 | Nonemployee Compensation |
| | | | | | Form 1099-NEC | |
| | | | 1 No | nemployee compensat | | Сору В |
| | | | \$ | | | For Recipient |
| PAYER'S TIN | RECIPIENT'S TIN | | 2 | | | |
| RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code | | | 3 | | | 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 |
| | | | 4 Federal income tax withheld | | | |
| | | | \$ | | | sanction may be imposed on you if this income is taxable and the IRS |
| | | FATCA filing requirement | | | | determines that it has not been reported. |
| | | | | | | |
| Account number (see instructions) | | ! | 5 Sta | te tax withheld | 6 State/Payer's state no. | 7 State income \$ |
| Form 1099-NEC (k | keep for your records | | \$ | | | \$ |
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. | | | CTED | (if checked) | OMB No. 1545-0116 | Nonemployee Compensation |
| | | | | | Form 1099-NEC | |
| | | | 1 No | nemployee compensat | ion | |
| PAYER'S TIN | RECIPIENT'S TIN | | | | | 1 |
| | | | 2 | | | 1 |
| RECIPIENT'S name, street address, city or town, sta | te or province, country, and ZIP or fo | oreign postal code | 3 | | | This is important tax information and is being furnished to |
| RECIPIENT'S name, street address, city or town, sta | te or province, country, and ZIP or fo | oreign postal code | 3 | deral income tax withho | eld | 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 |
| RECIPIENT'S name, street address, city or town, sta | te or province, country, and ZIP or fo | | 3 4 Fe | ederal income tax withho | eld | 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 |
| RECIPIENT'S name, street address, city or town, sta | te or province, country, and ZIP or fo | FATCA filling requirement | 3 4 Fe | ederal income tax withho | eld | 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 |
| RECIPIENT'S name, street address, city or town, sta | te or province, country, and ZIP or fo | FATCA filling | 3 4 Fe | deral income tax withhouse tax withhouse tax withhold | 6 State/Payer's state no. | 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 |