

## 1099 NEC - PDF Fillable

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>	None	malayaa	
John Doe		(Rev. January 2024)		mployee ensation	
123 Main Street High Point NC	For calendar year 2023		Compensation		
PAYER'S TIN RECIPIENT'S TIN	1 Nonemployee compensation			Copy A	
12322321 32132132	\$	123,456,	6 For Intern	nal Revenue	
RECIPIENT'S name	2 Payer made direct sal consumer products to	es totaling \$5,000 or more of	Ser	vice Center Form 1096.	
ane Doe	3		For P	For Privacy Act and Paperwork Reduction Act	
Street address (including apt. no.)			Notice, se	ee the current	
111 S Main St,	4 Federal income tax withheld			General Instructions for Certain Information	
City or town, state or province, country, and ZIP or foreign postal code	\$			Returns.	
High Point	5 State tax withheld	6 State/Payer's state no.	7 State in	come	
Account number (see instructions) 2nd TIN not.	\$ 3232	3232	S	545	
12221212 X	\$ 3232	4343	\$	543	