	OMB No. 1545-0116 income tax return, when required.	To be filed with recipient's state inc	OMB No. 1545-0116 come tax return, when required.	1	OMB No. 1545-0116 income tax return, when required.
Nonemployee Compensation Copy 2	1099-NEC 2022	Nonemployee Compensation Copy 2	1099-NEC 2022	Nonemployee Compensation Copy 2	1099-NEC 2022
7 State income - line 1	7 State income - line 2	7 State income - line 1 7 \$	State income - line 2	7 State income - line 1	7 State income - line 2
5 State tax withheld - line 1 \$ 6 State/Payer's state no line 1	5 State tax withheld - line 2 \$ 6 State/Payer's state no line 2	\$	State tax withheld - line 2 State/Payer's state no line 2	5 State tax withheld - line 1 \$ 6 State/Payer's state no line 1	5 State tax withheld - line 2 \$ 6 State/Payer's state no line 2
VACHI LLC 5805 SILVERTON AVE, MCKINNEY, TX 75070		VACHI LLC 5805 SILVERTON AVE, MCKINNEY, TX 75070		VACHI LLC 5805 SILVERTON AVE, MCKINNEY, TX 75070	
RECIPIENT'S name, street address	CORRECTED S, city, state, and ZIP code	RECIPIENT'S name, street address, c	CORRECTED Ity, state, and ZIP code	RECIPIENT'S name, street address	CORRECTED . s, city, state, and ZIP code
RECIPIENT'S TIN 87-0831835	Account number (see instructions)	RECIPIENT'S TIN 87-0831835	Account number (see instructions)	RECIPIENT'S TIN 87-0831835	Account number (see instructions)
PAYER'S name, street address, city, state, ZIP code, and telephone no. RAHAS TECH LLC 14661 ROSELAWN LANE FRISCO, TX 75035		PAYER'S name, street address, city, state, ZIP code, and telephone no. RAHAS TECH LLC 14661 ROSELAWN LANE FRISCO, TX 75035		PAYER'S name, street address, city, state, ZIP code, and telephone no. RAHAS TECH LLC 14661 ROSELAWN LANE FRISCO, TX 75035	
PAYER'S TIN 85-2678050	•	PAYER'S TIN 85-2678050		PAYER'S TIN 85-2678050	<u>*</u>
3	4 Federal income tax withheld \$	3 4	Federal income tax withheld	3	4 Federal income tax withheld \$
Nonemployee compensation 65240.00	Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	1 Nonemployee compensation 2 \$ 65240.00	Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	Nonemployee compensation 65240.00	Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale
Copy B - For Recipient	OMB No. 1545-0116 ng furnished to the Internal Revenue Service.	COPY B This is important tax information and is be sanction may be imposed on you if this in			a negligence penalty or other
Nonemployee Compensation	1099-NEC		WICKIN	IIIE I, I <i>n 19</i> 070	
7 State income - line 1	7 State income - line 2	VACHI LLC 5805 SILVERTON AVE, MCKINNEY, TX 75070			
5 State tax withheld - line 1 \$ 6 State/Payer's state no line 1	5 State tax withheld - line 2 \$ 6 State/Payer's state no line 2				
VACHI LLC 5805 SILVERTON AVE, MCKINNEY, TX 75070					
RECIPIENT'S name, street address	CORRECTED S, city, state, and ZIP code				
RECIPIENT'S TIN XX-XXX1835	Account Number (see instructions)				
		Box 1. Shows nonemployee compensation. If the amount in this box is SE income, report it on Schedule C or F (Form 1040) if a sole proprietor, or on Form 1065 and Schedule K-1 (Form 1065) if a partnership, and the recipient/partner completes Schedule SE (Form 1040).		after they were published, go to www.irs.gov/Form1099NEC. Free File Program. Go to www.irs.gov/FreeFile to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.	
		Account number. May show an account assigned to distinguish your account.		Boxes 5–7. State income tax withheld Future developments. For the latest related to Form 1099-NEC and its instr	information about developments
RAHAS TECH LLC 14661 ROSELAWN LANE FRISCO, TX 75035		Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (TIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)).		Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.	
	y, state, ZIP code, and telephone no.	If you are not an employee but the amou employment (SE) income (for example, it or a hobby), report the amount shown in (on Schedule 1 (Form 1040)).	t is income from a sporadic activity	C (Form 1040). Box 3. Reserved for future use.	sale of these products off Schedule
PAYER'S TIN	\$	this form, report the amount shown in bo salaries, tips, etc." of Form 1040, 1040-5 complete Form 8919 and attach it to you Pub. 1779, Independent Contractor or Er	R, or 1040-NR. You must also r return. For more information, see	the appropriate line of their tax returns. Box 2. If checked, consumer products totaling \$5,000 or more were sold to you for resale, on a buy-sell, a deposit-commission, or other basis. Generally, report any income from your sale of these products on Schedule	
\$ 65240.00	products to recipient for resale 4 Federal income tax withheld	You received this form instead of Form V consider you an employee and did not wi security and Medicare tax. If you believe you are an employee and	ithhold income tax or social I cannot get the payer to correct	Note: If you are receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES (NR)). Individuals must report these amounts as explained in these box 1 instructions. Corporations, fiduciaries, and partnerships must report these amounts on	
Nonemployee compensation	Payer made direct sales totaling \$5,000 or more of consumer	Instructions for Recipient		Note: If you are receiving payments or	which no income social security