

CORRECTED (if checked)

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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. STATE OF CALIFORNIA FRANCHISE TAX BOARD – MCTR PO BOX 942840 SACRAMENTO, CA 94240-0040 1-800-542-9332		1 Rents \$	OMB No. 1545-0115 Form 1099-MISC (Rev. January 2022)		Miscellaneous Information
		2 Royalties \$	For calendar year 2022		
		3 Other income \$ 1,050.00	4 Federal income tax withheld \$		
PAYER'S TIN 68-0204061	RECIPIENT'S TIN XXX-XX-6550	5 Fishing boat proceeds \$	6 Medical and health care payments \$		Copy B For Recipient
RECIPIENT'S name AMANDEEP S BEHL KAWAL P KAUR Street address (including apt. no.) 150 AZZURO CT City or town, state or province, country, and ZIP or foreign postal code MORGAN HILL CA 95037-5388		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest \$		
		9 Crop insurance proceeds \$	10 Gross proceeds paid to an attorney \$		
		11 Fish purchased for resale \$	12 Section 409A deferrals \$		
		13 FATCA filing requirement <input type="checkbox"/>	14 Excess golden parachute payments \$	15 Nonqualified deferred compensation \$	
		Account number (see instructions)	16 State tax withheld \$ \$	17 State/Payer's state no.	18 State income \$ \$

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.

Form **1099-MISC** (Rev. 1-2022) (keep for your records)

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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