	☐ VOID ☐ COF	RECTED		
PAYER'S name, street address, city o		ZIP	OMB No. 1545-0116	
or foreign postal code, and telephone no. 25287119			Form 1099-NEC	
SARAFORCE LLC (856)400-3637		37	Form 1033-INEC	Nonemployee
102 CHRISTOPHER COLUMBUS DR			(Rev. January 2022)	Compensation
APT 902			For calendar year	•
JERSEY CITY NJ 07302- 557			20 22	
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compe	nsation	Copy 2
83-4686275	XXX-XX-9170	\$ 50400	\$ 50400.00	
RECIPIENT'S name		2 Payer made direct sa	2 Payer made direct sales totaling \$5,000 or more of	
MIRDULA GARG		consumer products	consumer products to recipient for resale	
		3	3	
Street address (including apt. no.) 5552 WHITE STONE TRACE				return, when required.
		4 Federal income tax v	4 Federal income tax withheld	
City or town, state or province, count	ry, and ZIP or foreign postal code	\$		
POWELL OH 43065		5 State tax withheld	6 State/Payer's state no.	7 State income
Account number (see instructions)			NY83-4686275	\$ 50400.00
000005 KH/BSS	A	\$		 \$
Form 1099-NEC (Rev. 1-2022)		v/Form1099NEC	Department of the Tr	easury - Internal Revenue Service
<u>~</u>		<u>Detach Here</u>		√ .
	Псоб	RRECTED (if checked	1)	
PAYER'S name, street address, city of		***************************************	OMB No. 1545-0116	
or foreign postal code, and telephone no. 25287119				
SARAFORCE LLC (856)400-3637		87	Form 1099-NEC	Nonemployee
102 CHRISTOPHER COLUMBUS DR			(Rev. January 2022)	Compensation
APT 902			For calendar year	Componication
JERSEY CITY NJ 07302- 557			2022	
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compe		Сору В
		h		For Recipient
83-4686275		1	\$ 50400.00 2 Payer made direct sales totaling \$5,000 or more of	
			to recipient for resale	This is important tax information and is being furnished to the IRS. If you are
MIRDULA GARG		2	3	
Street address (including apt. no.) 5552 WHITE STONE TRACE City or town, state or province, country, and ZIP or foreign postal code		5		
			4 Endard income tax withhold	
		4 Federal income toy	withhald	negligence penalty or other sanction may be imposed on you if this income is taxable
		4 Federal income tax	s withheld	sanction may be imposed on you if this income is taxable and the IRS determines that it
POWELL OH 43065		\$		sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
POWELL OH 43065 Account number (see instructions)		_	6 State/Payer's state no.	sanction may be imposed on you if this income is taxable and the IRS determines that it

000005 KH/BSS Form **1099-NEC** (Rev. 1-2022)

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

(keep for your records)

Instructions for Recipient

You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax.

If you believe you are an employee and cannot get the payer to correct this form, report the amount shown in box 1 on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. For more information, see Pub. 1779, Independent Contractor or Employee.

If you are not an employee but the amount in box 1 is not selfemployment (SE) income (for example, it is income from a sporadic activity or a hobby), report the amount shown in box 1 on the "Other income" line (on Schedule 1 (Form 1040)).

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 (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

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).

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 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 C (Form 1040).

Box 3. Reserved for future use.

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.

Boxes 5-7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted 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.