

State of California
 Franchise Tax Board
 PO Box 942840
 Sacramento, CA 94240-0040

NISHANTH RE MANCHIREVULA
 GNANESHWARI KANDHADA
 7045 PASEO ST
 TRACY CA 95377-7719

02336524
 MSP 3150



CORRECTED (if checked)

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 Copy B For Recipient 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.
		2 Royalties \$		
		3 Other income \$ 1,050.00	4 Federal income tax withheld \$	
PAYER'S TIN 68-0204061	RECIPIENT'S TIN XXX-XX-1180	5 Fishing boat proceeds \$	6 Medical and health care payments \$	
RECIPIENT'S name NISHANTH RE MANCHIREVULA GNANESHWARI KANDHADA Street address (including apt. no.) 7045 PASEO ST City or town, state or province, country, and ZIP or foreign postal code TRACY CA 95377-7719		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. \$

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

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

OM773200

