

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Sunshine Elite Education LLC 15320 NW Central Dr. Ste D6 Portland OR 97229 5039152956		OMB No. 1545-0116 Form 1099-NEC (Rev. January 2022) For calendar year 20 <u>22</u>	Nonemployee Compensation
PAYER'S TIN 81-1289377	RECIPIENT'S TIN 544796664	1 Nonemployee compensation \$ 4140.00	
RECIPIENT'S name Shalika Arora		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	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.
Street address (including apt. no.) 4611 NW Sidewinder Pl		3	
City or town, state or province, country, and ZIP or foreign postal code Beaverton OR 97006		4 Federal income tax withheld \$	
Account number (see instructions)		5 State tax withheld \$ 6 State/Payer's state no.	
		7 State income \$	