			CTED (if checked)			
Nonemployee Compensation		OMB No. 1545-0116 Form <b>1099-NEC</b>		AYER'S name, address, ZIP/postal code, country & phone no. TEKORG INC		
		(Rev. January 2022)			22636 GLENN DR STERLING VA 20164	
		For calendar year 2023		(248) 227-2445		
Copy B	1 Nonemployee compensation			RECIPIENT'S TIN	PAYER'S TIN	
For Recipient	\$ 90316.60			XX-XXX5294	46-1311390	
This is important tay information and is being furnished to the IRS. If you		<b>U</b>	2 Payer made direct sales tot consumer products to recip	RECIPIENT'S name, address, ZIP/postal code & country VISION SOLUTIONS LLC 6301 WINDHAVEN PKWY APT 1509 PLANO TX 75093		
are required to file a return, a negligence penalty or other sanction may be imposed or			3			
you if this income is taxable and the IRS determines that it has not been reported.		ithheld	4 Federal income tax withhe \$			
7 State income		6 State/Payer's state no.	5 State tax withheld 6 S			
\$			\$		Account number (see instructions)	
\$			\$		275450990346	
- Internal Revenue Service	Freasury -	Department of the 1		(keep for your records)	Form <b>1099-NEC</b> (Rev. 1-2022)	

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		CTED (if checked)					
AYER'S name, address, ZIP/postal code, country & phone no.		OMB No. 1545-0116					
TEKORG INC 22636 GLENN DR		F	orm 1099-NEC		Nonemployee		
STERLING VA 20164				(Rev. January 2022)		Compensation	
				For calendar year			
(24	48) 227-2445			2023			
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation			Сору В		
46-1311390	XX-XXX5294	\$ 9031	16.60	)		Duplicate	
RECIPIENT'S name, address, ZIP/pos	2 Payer made direct sales totaling \$5,000 or more of						
VISION SOLUTIONS LL	consumer products to	o recipient	for resale				
6301 WINDHAVEN PKWY	3						
PLANO TX 75093							
	4 Federal income tax	withheld					
	\$						
		5 State tax withheld	6 State	e/Payer's state no.		7 State income	
Account number (see instructions)		\$				\$	
275450990346		\$				\$	

Form **1099-NEC** (Rev. 1-2022)

(keep for your records)

Department of the Treasury - Internal Revenue Service

## 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.