

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  <b>Frog Tutoring, LLC</b> <b>1751 River Run Suite 200</b> <b>Fort Worth, TX 76107</b> <b>877 904 0134</b>		1 Rents \$	OMB No. 1545-0115 Form <b>1099-MISC</b> (Rev. January 2024) For calendar year <b>2023</b>	<b>Miscellaneous Information</b>  <b>Copy 2</b> <b>To be filed with recipient's state income tax return, when required.</b>	
		2 Royalties \$			
		3 Other income \$ <b>1200</b>	4 Federal income tax withheld \$		
PAYER'S TIN <b>27-1000987</b>	RECIPIENT'S TIN <b>801215423</b>	5 Fishing boat proceeds \$	6 Medical and health care payments \$		
RECIPIENT'S name <b>Vinod Rao</b>  Street address (including apt. no.) <b>4250 Indigo Walk Lane</b>  City or town, state or province, country, and ZIP or foreign postal code <b>46239</b>		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 \$		
Account number (see instructions)		<input type="checkbox"/> 13 FATCA filing requirement	14 Excess golden parachute payments \$		15 Nonqualified deferred compensation \$
		16 State tax withheld \$	17 State/Payer's state no.		18 State income \$