

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. <b>Workintent Solutions LLC</b> 9768 Haven Port Ln Ooltewah, TN 37363		OMB No. 1545-0116
		Form <b>1099-NEC</b> (Rev. January 2024)
		For calendar year <u>2023</u>

**Nonemployee Compensation**

PAYER'S TIN <b>87-2941953</b>	RECIPIENT'S TIN	<b>1</b> Nonemployee compensation \$ <b>96030.00</b>	<b>Copy B For Recipient</b> 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.
RECIPIENT'S name		<b>2</b> Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	
Street address (including apt. no.)		<b>3</b>	
City or town, state or province, country, and ZIP or foreign postal code		<b>4 Federal income tax withheld</b> \$	
Account number (see instructions)		<b>5</b> State tax withheld <b>6</b> State/Payer's state no.	
		\$	<b>7</b> State income \$