		-	CTED (if checked)		1		
PAYER'S name, street address, city o or foreign postal code, and telephone		ce, country, ZIP	1 Rents	OMB No. 1545-0115			
o, totolgii pootai ootol ame totol			\$ 0.00	Form 1099-MISC	Miscellaneou		
XXVI HOLDINGS INC.			2 Royalties	(Rev. January 2022)	1	Information	
1600 AMPHITHEATRE PARKWAY			0.400.40	For calendar year 20 23			
MOUNTAIN VIEW, CA 94043			\$ 2,138.49 3 Other income	4 Federal income tax	withheld	Copy E	
650-253-0000			\$ 0.00	\$0.00		For Recipient	
PAYER'S TIN	RECIPIENT'S TIN		5 Fishing boat proceeds	6 Medical and health payments	care		
82-2182297	XXX-XX-5032			payments			
			\$ 0.00	\$ 0.00			
RECIPIENT'S name		7 Payer made direct sales	8 Substitute payments in lieu of dividends or interest		This is important tax		
GAYATHRI GIRIDHARAN			totaling \$5,000 or more of consumer products to		rest	information and is	
Chronic address (including out to)			9 Crop insurance proceeds	\$ 0.00 10 Gross proceeds pa	id to an	being furnished to the IRS. If you are	
Street address (including apt. no.) 49 ROYAL CREST DRIVE APT6 City or town, state or province, country, and ZIP or foreign postal code NORTH ANDOVER, MA 01845			3 Clop madrance process	attorney	ttorney		
			\$ 0.00	\$ 0.00		return, a negligence penalty or othe	
			11 Fish purchased for resale	12 Section 409A defer	rals	sanction may be imposed on you i	
			\$	\$ 0.00		this income is taxable and the IRS	
		13 FATCA filing	14 Excess golden parachute	15 Nonqualified deferr	ed	determines that i	
		requirement	payments	compensation		has not beer reported	
			\$ 0.00	\$ 0.00		10.01-1-1	
Account number (see instructions)			16 State tax withheld \$ 0.00	17 State/Payer's state	no.	18 State income	
5896806757900301			\$	+		\$	
Form 1099-MISC (Rev. 1-2022)	(keep for your re	ecords)	www.irs.gov/Form1099MISC	Department of the T	reasury -	Internal Revenue Service	
,	, ,		CTED (if checked)				
PAYER'S name, street address, city of	r town, state or province		1 Rents	OMB No. 1545-0115	l		
or foreign postal code, and telephone	no.	,,,		- 1000 MISC		· • · · · · · · · · · · · · · · · · · ·	
			\$ 0.00	Form 1099-MISC	ľ	Miscellaneous	
XXVI HOLDINGS INC.			2 Royalties	(Rev. January 2022) For calendar year	1	Information	
1600 AMPHITHEATRE PARKWAY			\$ 2,138.49	20 23	l		
MOUNTAIN VIEW, CA 94043			3 Other income	4 Federal income tax	withheld	Copy 2	
650-253-0000			\$ 0.00	\$ 0.00		To be filed with	
PAYER'S TIN	RECIPIENT'S TIN		5 Fishing boat proceeds	6 Medical and health care payments		recipient's state income tax return	
82-2182297	XXX-XX-5032					when required	
			\$ 0.00	\$ 0.00		- 10 m m	
RECIPIENT'S name			7 Payer made direct sales	8 Substitute payment of dividends or inte			
GAYATHRI GIRIDHARAN			totaling \$5,000 or more of consumer products to	\$ 0.00	1631	4 90 6 2 2	
Company (controlled and controlled a			9 Crop insurance proceeds	10 Gross proceeds pa	id to an		
Street address (including apt. no.) 49 ROYAL CREST DRIVE APT6			S Glop modiance process	attorney			
			\$ 0.00	\$ 0.00			
City or town, state or province, country, and ZIP or foreign postal code			11 Fish purchased for resale	12 Section 409A deferrals			
NORTH ANDOVER, MA 01845			\$	\$ 0.00			
		13 FATCA filing	14 Excess golden parachute	15 Nonqualified deferr	ed	1	
		requirement	payments	compensation			
			\$ 0.00	\$ 0.00		18 State income	
Account number (see instructions) 5896806757900301			16 State tax withheld \$ 0.00	17 State/Payer's state no.		\$	
		\$	+		\$		
Form 1099-MISC (Rev. 1-2022)		www.irs.gov/For	rm1099MISC	Department of the T	reasury -	Internal Revenue Service	
		CORRE	CTED (if checked)			-	
PAYER'S name, street address, city of			1 Rents	OMB No. 1545-0115			
or foreign postal code, and telephone	no.			Form 1099-MISC	١,	Miscellaneous	
			\$ 0.00 2 Royalties	(Rev. January 2022)		Information	
XXVI HOLDINGS INC.			Zitoyanos	For calendar year	1		
1600 AMPHITHEATRE PARKWAY MOUNTAIN VIEW, CA 94043			\$2,138.49	20 23			
MODITIANT VIEW, CATOTO			3 Other income	4 Federal income tax	withheld	Copy 2	
650-253-0000	RECIPIENT'S TIN		\$ 0.00 5 Fishing boat proceeds	\$ 0.00 6 Medical and health	care	To be filed with recipient's state	
PAYER'S TIN 82-2182297	XXX-XX-5032		O, island Boat Process	payments		income tax return	
02-2102231	7001701002	*				when required	
			\$ 0.00	\$ 0.00	A		
RECIPIENT'S name			7 Payer made direct sales totaling \$5,000 or more of	8 Substitute payment of dividends or inte			
GAYATHRI GIRIDHARAN			consumer products to recipient for resale	\$ 0.00			
Street address (including apt. no.)			9 Crop insurance proceeds	10 Gross proceeds pa	id to an		
49 ROYAL CREST DRIVE APT6			C 0 00	attorney			
City or town, state or province, country, and ZIP or foreign postal code			\$ 0.00 11 Fish purchased for resale	\$ 0.00 12 Section 409A defer	rals		
NORTH ANDOVER, MA 01845	y, and ZiP or foreign p	isii pultilased loi resale	2 2333011 4007 03161		lis		
•			\$	\$ 0.00			
		13 FATCA filing requirement	14 Excess golden parachute payments	15 Nonqualified deferr compensation	ed		
		requirement		\$ 0.00			
Account number (see instructions)	The state of the s	1	\$ 0.00 16 State tax withheld	17 State/Payer's state	no.	18 State income	
5896806757900301			\$ 0.00			\$	
			\$		_	\$	
Form 1099-MISC (Rev. 1-2022)		www.irs.gov/For	rm1099MISC	Department of the T	reasury -	 Internal Revenue Service 	