

# 1099-NEC Nonemployee Compensation Statement

## Payer Information

Payer's Name:

Payer's TIN:

Payer's Address:

## Recipient Information

Recipient's Name:

Recipient's TIN:

Recipient's Address:

## Nonemployee Compensation

Box 1: Nonemployee Compensation (\$):

## Other Information

Federal Income Tax Withheld:

State Information: