

Form 1099-NEC Nonemployee Compensation

2025

Copy B — For Recipient. OMB No. 1545-0116

PAYER'S name, street address, city, state, ZIP code, and telephone no. Coastal Telehealth Partners LLC 88 Harbor View Dr, Suite 210 Petaluma, CA 94952		1 Nonemployee compensation \$ 24,750.00
PAYER'S TIN 81-4402913	RECIPIENT'S TIN XXX-XX-4402	4 Federal income tax withheld \$ 0.00
RECIPIENT'S name and address Alina Cardoso 1180 Alderwood Ln, Santa Rosa, CA 95404		5 State tax withheld 6 State/Payer's state no. 7 State income \$ 0.00 CA / 123-4567-8 \$ 24,750.00

This is important tax information and is being furnished to the IRS.