



**N0055828

IMPACT 100 NYC INC
75 E END AVE APT 12E
IMPACT 100 NYC INC
NEW YORK, NY 10028

Instructions for Payee

You have received this form because you have either: (a) accepted payment cards for payments, or (b) received payments through a third party network that exceeded \$20,000 in gross total reportable transactions and the aggregate number of those transactions exceeded 200 for the calendar year. Merchant acquirers and third party settlement organizations, as payment settlement entities (PSE), must report the proceeds of payment card and third party network transactions made to you on Form 1099-K under Internal Revenue Code section 6050W. The PSE may have contracted with an electronic payment facilitator (EPF) or other third party payer to make payments to you.

If you have questions about the amounts reported on this form, contact the FILER whose information is shown in the upper left corner on the front of this form. If you do not recognize the FILER shown in the upper left corner of the form, contact the PSE whose name and phone number are shown in the lower left corner of the form above your account number.

See the separate instructions for your income tax return for using the information reported on this form.

Payee's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account number or other unique number the PSE assigned to distinguish your account.

Box 1a. Shows the aggregate gross amount of payment card/third party network transactions made to you through the PSE during the calendar year.

Box 1b. Shows the aggregate gross amount of all reportable payment transactions made to you through the PSE during the calendar year where the card was not present at the time of the transaction or the card number was keyed into the terminal. Typically, this relates to online sales, phone sales, or catalogue sales. If the box for third party network is checked, or if these are third party network transactions, card not present transactions will not be reported.

Box 2. Shows the merchant category code used for payment card/third party network transactions (if available) reported on this form.

Box 3. Shows the number of payment transactions (not including refund transactions) processed through the payment card/third party network.

Box 4. Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your TIN or you did not furnish the correct TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, and Pub. 505. Include this amount on your income tax return as tax withheld.

Boxes 5a-5l. Shows the gross amount of payment card/third party network transactions made to you for each month of the calendar year.

Boxes 6-8. Shows state and local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-K and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099K.

CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. CYNERGY DATA c/o MERCHANT SERVICES P. O. Box 246 Alpharetta, GA 30009		FILER'S TIN 271100552	OMB No. 1545-2205 2020 Form 1099-K	Payment Card and Third Party Network Transactions	
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input checked="" type="checkbox"/> X Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>		PAYEE'S TIN 844467231	1a Gross amount of payment card/third party network transactions \$ 35,968.60		Copy B For Payee 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 taxable income results from this transaction and the IRS determines that it has not been reported.
Check to indicate transactions reported are: Payment card <input checked="" type="checkbox"/> X Third party network <input type="checkbox"/>		1b Card Not Present transactions \$ 35,968.60	2 Merchant category code 8398	4 Federal income tax withheld \$ 0.00	
PAYEE'S name IMPACT 100 NYC INC		3 Number of payment transactions 41	5a January \$ 0.00		5b February \$ 0.00
Street address (including apt. no.) 75 E END AVE APT 12E IMPACT 100 NYC INC		5c March \$ 0.00	5d April \$ 0.00		5e May \$ 0.00
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10028		5g July \$ 0.00	5f June \$ 0.00		5h August \$ 0.00
PSE'S name and telephone number SYNOVUS BANK 877-424-5587		5i September \$ 0.00	5j October \$ 0.00		5k November \$ 20,065.50
Account number (see instructions) 3899000004285829		5l December \$ 15,903.10	6 State NY		7 State identification no.
		8 State income tax withheld \$ 0.00	8 State income tax withheld \$ 0.00		

MERCHANT SERVICES
P.O. BOX 246
ALPHARETTA, GA 300090246

If you have any questions related to your



**N0084434

IMPACT 100 NYC INC
75 E END AVE APT 12E
IMPACT 100 NYC INC
NEW YORK, NY 10028

Instructions for Payee

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If you have questions about the amounts reported on this form, contact the FILER whose information is shown in the upper left corner on the front of this form. If you do not recognize the FILER shown in the upper left corner of the form, contact the PSE whose name and phone number are shown in the lower left corner of the form above your account number.

See the separate instructions for your income tax return for using the information reported on this form.

Payee's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account number or other unique number the PSE assigned to distinguish your account.

Box 1a. Shows the aggregate gross amount of payment card/third party network transactions made to you through the PSE during the calendar year.

Box 1b. Shows the aggregate gross amount of all reportable payment transactions made to you through the PSE during the calendar year where the card was not present at the time of the transaction or the card number was keyed into the terminal. Typically, this relates to online sales, phone sales, or catalogue sales. If the box for third party network is checked, or if these are third party network transactions, card not present transactions will not be reported.

Box 2. Shows the merchant category code used for payment card/third party network transactions (if available) reported on this form.

Box 3. Shows the number of payment transactions (not including refund transactions) processed through the payment card/third party network.

Box 4. Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your TIN or you did not furnish the correct TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, and Pub. 505. Include this amount on your income tax return as tax withheld.

Boxes 5a-5l. Shows the gross amount of payment card/third party network transactions made to you for each month of the calendar year.

Boxes 6-8. Shows state and local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-K and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099K.

CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. CYNERGY DATA c/o MERCHANT SERVICES P.O. BOX 246 ALPHARETTA, GA 30009		FILER'S TIN 271100552	OMB No. 1545-2205 2020 Form 1099-K	Payment Card and Third Party Network Transactions
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input checked="" type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>		PAYEE'S TIN 844467231	Copy B For Payee 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 taxable income results from this transaction and the IRS determines that it has not been reported.	
Check to indicate transactions reported are: Payment card <input checked="" type="checkbox"/> Third party network <input type="checkbox"/>		1a Gross amount of payment card/third party network transactions \$ 44,865.60		2 Merchant category code 8398
PAYEE'S name IMPACT 100 NYC INC		3 Number of payment transactions 48	4 Federal income tax withheld \$ 0.00	
Street address (including apt. no.) 75 E END AVE APT 12E IMPACT 100 NYC INC		5a January \$ 0.00	5b February \$ 0.00	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10028		5c March \$ 0.00	5d April \$ 0.00	
PSE'S name and telephone number CITIZENS BANK FOR CYNERGY DATA 866-345-6188		5e May \$ 0.00	5f June \$ 0.00	
Account number (see instructions) 3899000004285829		5g July \$ 18,729.00	5h August \$ 9,511.70	
		5i September \$ 3,292.80	5j October \$ 13,332.10	
		5k November \$ 0.00	5l December \$ 0.00	
		6 State NY	7 State identification no. 	
			8 State income tax withheld \$ 0.00	