


CORRECTED

FILER'S name, street address, city, state, ZIP code, and telephone no. MERCHANT CARD SERVICES LLC 560 BROADHOLLOW ROAD MELVILLE NY 11747-3702 Telephone: 631-249-7744	FILER'S federal identification no. 13-3034234	OMB No. 1545-2205 2011 Form 1099-K	Merchant Card and Third Party Network Payments
	PAYEE'S taxpayer identification no. 13-9943304		
If checked, FILER is a Payment Settlement Entity (PSE) <input type="checkbox"/> If checked, FILER is Electronic Payment Facilitator (EPF)/Third Party Payer (TPP) <input checked="" type="checkbox"/>	1 Gross amount of merchant card/third party payments \$ 3970000.00	2 Merchant category code 5811	Copy B For Payee
PAYEE'S name, street address, city, state, and ZIP code  PARK SIDE CATERERS OF SUFFOLK 2310 JERICHO TURNPIKE SMITHTOWN NY 11734-2710	3	4	
PSE'S name and telephone number ELAVON BANK OF AMERICA 800-447-3737	5a January \$ 175000.00	5b February \$ 225000.00	This is important tax information and is being furnished to the Internal Revenue Service. 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.
	5c March \$ 140000.00	5d April \$ 275000.00	
5e May \$ 325000.00	5f June \$ 405000.00		
5g July \$ 425000.00	5h August \$ 850000.00		
5i September \$ 445000.00	5j October \$ 330000.00		
5k November \$ 185000.00	5l December \$ 190000.00		
Account number (see instructions) MID-123456789			

Form 1099-K

(Keep for your records)

Department of the Treasury - Internal Revenue Service

Instructions for Payee

Merchant card and third party network payers, 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. You have received this form because you have accepted merchant cards for payments, or because you received payments through a third party network that exceeded \$20,000 in gross total reportable payment transactions and the total number of those transactions exceeded 200 for the calendar year.

The PSE may have contracted with an electronic payment facilitator (EPF) or other third party payer (TPP) 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.

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

Box 1. Shows the aggregate gross amount of merchant card/third party network payments made to you through the PSE during the tax year.

Box 2. Shows the category code for the merchant.

Boxes 5a-5l. Shows the gross amount of merchant card/third party network payments received by you for each month of the reporting calendar year. This amount is provided to assist you in the accurate preparation of your fiscal year tax return.