## FORM 1099 INFORMATION



## IMPORTANT: IF YOU ARE REQUIRED TO FILE 1099s, RETURN THIS FORM TO US BY JANUARY 6, 2023.

As with previous years, we have the ability to file all required 1099s on your behalf. Form 1099s must be filed by January 31, and will be issued as follows:

- For business payments in excess of \$600.
- For payments made to individuals, sole proprietors, partnerships, LLCs, as well as to all professional legal service providers. (Note: You are not required to send 1099s for payments made to corporations.)
- For rent, fees, commissions, prizes and awards for services performed as a nonemployee, and other forms of compensation for services performed.

There are penalties from the IRS and Department of Labor for not filing these forms in a timely manner, so it is important to provide me with the appropriate information to issue 1099s. Please provide information as requested below. We will complete the 1099s, return them to you to mail, and we will file all applicable forms with the IRS on your behalf.

Your Information					
Your Name or Business Name:					
SSN or Business EIN:	Phone:				
Address:					
City:			State:	Zip:	
Payee Information					
Individual or Business Name:					
Individual SSN or Business EIN:					
Address:					
City:			State:	Zip:	
Amount: \$	Type of Payment:	O Interest	O Services	O Rent	
Individual or Business Name:					
Individual SSN or Business EIN:					
Λ ald 12 a a a					
City:			State:	Zip:	
Amount: \$	Type of Payment:			O Rent	
Individual or Business Name:					
Individual SSN or Business EIN:					
Address:					
City:			State:	Zip:	
Amount: \$	Type of Payment:	O Interest	O Services	○ Rent	

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Payee Information				
Individual or Business Name:				
Individual SSN or Business EIN:				
Address:				
City:			State:	Zip:
Amount: \$	Type of Payment:	O Interest	O Services	O Rent
Individual or Business Name:				
Individual SSN or Business EIN:				
Address:				
City:			State:	Zip:
Amount: \$	Type of Payment:	O Interest	O Services	O Rent
Individual SSN or Business EIN:				
Address:				
City:			State:	Zip:
Amount: \$	Type of Payment:	O Interest	O Services	O Rent
Individual or Business Name:				
Individual SSN or Business EIN:				
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Cita			State:	Zip:
Amount: \$	Type of Payment:	() Interest		O Rent
Amount. \$	туре от гаутнети.	<u> </u>	O Services	<u> </u>
Individual or Business Name:				
Individual SSN or Business EIN:				
Address:				
City:			State:	Zip:
Amount: \$	Type of Payment:	O Interest	O Services	○ Rent
Individual or Business Name:				
Individual SSN or Business EIN:				
Address:				
City:			State:	Zip:
Amount: \$	Type of Payment:	O Interest	O Services	O Rent