

1099 CONTRACTOR SET-UP / CHANGE FORM

Company Name _____

- Please select one: New Contractor Change to Current Contractor Rehire
 Add 1099 to W2 Employee Add W2 Earnings to 1099

SSN/EIN:	Reason for 1099M:
Contractor's Company Name:	<input type="checkbox"/> Rent <input type="checkbox"/> Non Employee Comp. <input type="checkbox"/> Deceased Employee earning
Last Name:	Total Distribution:
First Name:	Distribution Amount: \$
Middle Initial:	Tax Amount Determined:
Address:	Tax Amount: \$
City:	Federal Tax Amount:
State:	State Tax Amount:
Zip Code:	Distribution Check <u>made payable</u> to: _____
State Income Tax:	_____
Effective Date of change: _____	Distribution Check <u>mailed</u> to: _____
Were wages entered before effective date:	_____
	Direct Deposit Information (if applicable): Name of Bank or Institution: _____ Routing Number: _____ Account Number: _____

Additional Notes:

Signature

Date