## FORM 1099 PREPARATION

Upload this form to mkatzcpa.com portal - do NOT email it. ~Never email anything with a social security number.~

All the forms must be submitted no later than January 10th.

## Report amounts paid by CASH, CHECK, WIRE, ZELLE or MONEY ORDER

Do Not include payments made by PAYPAL, CREDIT CARD, DEBIT CARD OR VENMO.

PA	YER INFORMATION (this	s is information about you or your b	usiness, as the issuer of the 10	99)				
Payer Legal Name <sup>1</sup>	Payer Tra (if applic	ade Name <sup>2</sup> Payer tax ID <sup>3</sup> able)	Street Address	City	State	Zip	Phone	Email
	<sup>1</sup> Payer Legal Name <sup>2</sup> Payer Trade Name	Your name as an individual (if so Your company DBA or the name		LLC) or your business name (if a corpor	ation, partnership, multi-n	nember LLC, etc)		
	<sup>3</sup> Payer tax ID	Your tax ID - either your SSN or F	EIN number.					

<sup>4</sup> Email The email you want shown on the recipients' 1099 for them to use if they have questions

## RECIPIENTS INFORMATION (this is information about the people or businesses whom you paid)

Payment for <sup>1</sup>	Recipient Name	Type of tax $\mathrm{ID}^2$	Recipient tax ID <sup>3</sup>	Recipient Trade Name <sup>4</sup>	Street Address	Address Line 2	City	State	Zip	Recipient's Email	Box 1 Amount paid <sup>5</sup>	Box 6a Work State <sup>6</sup>
(see choices below)				(if applicable)				(2 letters)	_			(2 letters)

<sup>1</sup> Payment for enter "Services" or "Rent" or "Interest" or "Royalty"

<sup>2</sup> Type of tax ID enter "EIN" or "SSN"

<sup>3</sup> Recipient tax ID Either an SSN or FEIN number.

<sup>4</sup> Recipient Trade Name example: DBA, name of Single Member LLC, etc

<sup>5</sup> Box 1 Amount paid Do not include payments made through PayPal, Venmo, credit cards or debit cards

<sup>6</sup> Box 6a State What state was the vendor in when they did the work? If multiple states, make separate 1099 for each state.