

1099 CONTRACTOR PAYROLL & TAX INFORMATION

Form W-9 Substitute & Direct Deposit Authorization

1. CONTRACTOR PROFILE INFORMATION

LEGAL NAME (AS SHOWN ON YOUR INCOME TAX RETURN) _____

BUSINESS NAME / DISREGARDED ENTITY NAME (IF DIFFERENT FROM ABOVE) _____

STREET ADDRESS _____

APARTMENT/SUITE/UNIT _____

CITY _____

STATE _____

ZIP CODE _____

PHONE NUMBER _____

EMAIL ADDRESS _____

2. FEDERAL TAX CLASSIFICATION (CHECK ONLY ONE)

- ☐ Individual / Sole Proprietor / Single-member LLC
- ☐ C Corporation
- ☐ S Corporation
- ☐ Partnership
- ☐ Trust / Estate
- ☐ Limited Liability Company (LLC) - Tax Classification:

LLC TAX CLASSIFICATION LETTER (C = C CORP, S = S CORP, P = PARTNERSHIP) _____

EXEMPT PAYEE CODE (IF ANY) _____

3. TAXPAYER IDENTIFICATION NUMBER (TIN)

Enter your TIN in the appropriate box below. For individuals, this is generally your Social Security Number (SSN). For other entities, it is your Employer Identification Number (EIN).

Social Security Number (SSN)

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Employer Identification Number (EIN)

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4. PAYMENT & DIRECT DEPOSIT AUTHORIZATION

BANK NAME _____

ACCOUNT TYPE

☐ CHECKING



SAVINGS

ROUTING TRANSIT NUMBER (9 DIGITS)

ACCOUNT NUMBER

5. CERTIFICATION

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number; (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person.

I also authorize the payor to initiate direct deposit credit entries to the bank account designated above. This authorization remains in effect until written notice of termination is received.

CONTRACTOR SIGNATURE

(Sign by hand or via secure digital signature)

DATE

(MM/DD/YYYY)