



1099 Forms for Paid Subcontractors/Individuals – Tax Year 2024

1099s are required for persons paid over \$600 or more.

Complete information must be submitted by **Wednesday, January 15th, 2025** to TAI in order for recipient and taxing authority to receive their 1099 forms by the deadline - January 31, 2025.

FEES:

- 1099 Form to each recipient is \$75.00 for the first and \$50 for each additional.
- Filing of the 1096 summary is included in the price.
- Payment is due before the 1099s are sent and the 1096 summary is filed.

If your Subcontractors filled out the Federal W-9 as required, you may submit these forms. The W-9 should be presented before any money is paid out to avoid any misunderstandings.

Name of Subcontractor/Person: _____

Individual's Social Security Number - or - EIN of Business: _____

Complete Address: Street: _____

City: _____ State: _____ Zip: _____

Amount Paid in 2024: \$ _____

Name of Subcontractor/Person: _____

Individual's Social Security Number - or - EIN of Business: _____

Complete Address: Street: _____

City: _____ State: _____ Zip: _____

Amount Paid in 2024: \$ _____

Name of Subcontractor/Person: _____

Individual's Social Security Number - or - EIN of Business: _____

Complete Address: Street: _____

City: _____ State: _____ Zip: _____

Amount Paid in 2024: \$ _____

Name of Subcontractor/Person: _____

Individual's Social Security Number - or - EIN of Business: _____

Complete Address: Street: _____

City: _____ State: _____ Zip: _____

Amount Paid in 2024: \$ _____



Payment Authorization Form – 1099 Form Preparations

Choose **ONE** option below to authorize payment to Thomson Accountants, Inc. for your 1099 Form preparations.

OPTION 1: Checking/Savings account for electronic debit (**No Fee**)

Name of Financial Institution: _____

Name on Account : _____

Account Type: ☐ Checking ☐ Savings

Routing Number: _____

Account Number: _____

Client's Phone Number: (_____) _____ - _____

OPTION 2: Credit Card (**3.5% convenience fee**) **Visa and MasterCard only*

Card Type: ☐ Visa ☐ MasterCard

Name on Credit Card: _____

Credit Card Number: _____

Expiration Date: _____ CVC (3 digits): _____

Billing Zip Code: _____

I/We hereby authorize Thomson Accountants, Inc. to initiate debit entries to our account at the financial institution provided above for the purpose of paying our fees for accounting and/or tax work.

An invoice will be issued upon completion of work for our provided services. The debit will be processed on the invoice due date. If the due date falls on a weekend or holiday, it will be processed the next business day.

I/We understand that if the funds are not available in the above account at the time of debit, TAI will send notification that the transaction could not be completed. TAI will charge for fees due to insufficient funds or other reasons of unaccepted payment.

Further, I/we agree not to hold TAI responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution.

This agreement will remain in effect until TAI receives written notification of cancellation from me/us at the following email address **office@baertaxgroup.com**. The notice of cancellation must be received in such time and manner as to allow required time for processing.

Print Name: _____

Signed: _____ Date: _____