I|T|C

1099 Worksheet   Year   2025

Payer

Address

City   State   ZIP

Telephone #   (   )   -   Email Address

Federal EIN or Social Security Number

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1. Recipient   **W9 on File?**

    Address   YES ☐

    City   ZIP Code

    EIN or SSN   Email

    Amount $ Explanation

    Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

2. Recipient   **W9 on File?**

    Address   YES ☐

    City   ZIP Code

    EIN or SSN   Email

    Amount $ Explanation

    Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

3. Recipient   **W9 on File?**

    Address   YES ☐

    City   ZIP Code

    EIN or SSN   Email

    Amount $ Explanation

    Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

4. Recipient   **W9 on File?**

    Address   YES ☐

    City   ZIP Code

    EIN or SSN   Email

    Amount $ Explanation

    Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

EXPLANATION: Examples Include Subcontractors, Rent, Interest, Professional Services

Signature: _____   Date: _____

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5. Recipient | **W9 on File?**

Address | YES ☐

City | ZIP Code

EIN or SSN | Email

Amount $ | Explanation

Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

6. Recipient | **W9 on File?**

Address | YES ☐

City | ZIP Code

EIN or SSN | Email

Amount $ | Explanation

Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

7. Recipient | **W9 on File?**

Address | YES ☐

City | ZIP Code

EIN or SSN | Email

Amount $ | Explanation

Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

8. Recipient | **W9 on File?**

Address | YES ☐

City | ZIP Code

EIN or SSN | Email

Amount $ | Explanation

Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO

9. Recipient | **W9 on File?**

Address | YES ☐

City | ZIP Code

EIN or SSN | Email

Amount $ | Explanation

Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale: ☐ YES   ☐ NO