

# 1099 CORRECTIONS

Any changes to a Form 1099 AFTER it has been filed with the Internal Revenue Service requires a **CORRECTED** return.

AccuPay can prepare **CORRECTED** returns if the original return was processed by through AccuPay's 1099 System.

**Note:** If the return has not been filed with the IRS, then you may simply **REPROCESS** the return.

These instructions pertain only to **CORRECTING** a return after it has been filed with the IRS.

1. Make your Changes on the **ORIGINAL 1099** as listed in the table below. See example on next page.
2. Submit the changes to AccuPay (FAX 925/945-6544).

AccuPay does not E-file **CORRECTED** returns and will print all required copies of the 1096 and 1099 forms. **Sign and mail the RED copies to the Internal Revenue Service.**

| Error                                       | Original Form  | Corrected Forms   |
|---|--|---|
| Incorrect Payee Tax ID Number or Payee Name | Circle the incorrect information and write the corrected information on the original form.<br><br>Note: Original data must still be visible.   | Two 1099s will be prepared for each affected payee: <ul style="list-style-type: none"> <li>• On the incorrect ID/Name 1099, the Corrected Box will be checked and all amounts will be ZERO.</li> <li>• On the correct ID/Name 1099, the Corrected Box will NOT be checked and all money amounts will be shown.</li> <li>• The 1096 will include the following statement:<br/>"FILED TO CORRECT NAME OR TIN"</li> </ul>  |
| Incorrect Money Amount                      | Circle the change to be made and write the correct amount on the original form.  | One 1099 will be prepared for each affected payee along with a Form 1096 Transmittal. On the 1099: <ul style="list-style-type: none"> <li>• The corrected amount will be shown.</li> <li>• The Corrected Box will be marked.</li> </ul>   |
| Money Reported on the Wrong Type of 1099    | <ol style="list-style-type: none"> <li>1. Circle the original box and change to zero.</li> <li>2. Write the correct 1099 form type and the type of payment to being reported.</li> </ol> | Two sets of forms will be prepared: <ul style="list-style-type: none"> <li>• On the <b>incorrect 1099 type</b>, the Corrected Box will be checked and the money amount will be reported as zero. A separate Form 1096 Transmittal will be produced.</li> <li>• On the <b>correct 1099 type</b>, the Corrected Box will NOT be checked and all money amounts will be shown. A separate Form 1096 Transmittal will include the statement:<br/>"FILED TO CORRECT DOCUMENT TYPE"</li> </ul> |
| Money Reported in the Wrong Box             | Circle the 2 boxes. Change the original box to zero. Enter the amount in the correct box.  | One 1099 will be prepared for each affected payee. <ul style="list-style-type: none"> <li>• ZERO will be shown in the original box.</li> <li>• The money will be shown in the correct box.</li> <li>• The Corrected Box will be checked</li> <li>• Form 1096 Transmittal will be prepared.</li> </ul>   |

**Fees:** Basic Fee (includes first 5 payees)..... \$ 20.00  
 Each additional payee (after first 5)..... \$ 1.00

# SAMPLE

|   |  |  |  |  |            |   |
|---|--|--|--|--|------------|---|
| 01.21      0018-401-M      18   |  | <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED |  | OMB No. 1545-0115<br><b style="font-size: 2em;">2008</b><br>Form 1099-MISC   |            | <b>Miscellaneous Income</b><br><br><b>Copy C</b><br>For Privacy Act and Paperwork Reduction Act Notice, see the 2008 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| PAYER'S name, street address, city, state, ZIP code and phone no.<br><br>SHERWOOD FOREST FINANCE CO<br>6209 WAVERLY LANE<br>LONDON CA 94966<br><br>(925) 945-1660 |  |  |  |  |            |   |
| PAYER'S Federal ID number      RECIPIENT'S ID number      2nd TIN Not<br>94-1234567      123-85-2551 <input type="checkbox"/>                                     |  |  |  | 2 Royalties  | \$         | 4 Federal income tax withheld<br>\$   |
| RECIPIENT'S name, street address, city, state, and ZIP code<br><br>ROBIN HOOD<br>2745 FOREST ST<br>WALNUT GROVE CA 96251  |  |  |  | 3 Other income   | \$         |   |
| Account Number (optional)      15 Section 409A deferrals      15B Section 409A income<br>\$      \$      \$   |  |  |  | 4 Fishing boat proceeds  | \$         | 6 Medical and health care payments<br>\$  |
|   |  |  |  | 5 Nonemployee compensation   | \$ 2008.00 |   |
|   |  |  |  | 6 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$         | 8 Substitute payments in lieu of dividends or interest<br>\$  |
|   |  |  |  | 7 Excess golden parachute payments   | \$         |   |
|   |  |  |  | 8 Gross proceeds paid to an attorney   | \$         | 11  |
|   |  |  |  | 9 State tax withheld   | \$         | 12  |
|   |  |  |  | 10 State/Payer's state no.   | \$         | 18 State income   |
|   |  |  |  |  | \$         | \$  |

Form 1099-MISC

Department of the Treasury-Internal Revenue Service

|   |  |  |  |  |    |   |
|---|--|--|--|--|----|---|
| 0018 401M 0020 <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED   |  | <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED |  | OMB No. 1545-0115<br><b style="font-size: 2em;">2008</b><br>Form 1099-MISC   |    | <b>Miscellaneous Income</b><br><br><b>Copy C</b><br>For Privacy Act and Paperwork Reduction Act Notice, see the 2008 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| PAYER'S name, street address, city, state, ZIP code and phone no.<br><br>SHERWOOD FOREST FINANCE CO<br>6209 WAVERLY LANE<br>LONDON CA 94966<br><br>(925) 945-1660 |  |  |  |  |    |   |
| PAYER'S Federal ID number      RECIPIENT'S ID number      2nd TIN Not<br>94-1234567      94-1233446 <input type="checkbox"/>                                      |  |  |  | 2 Royalties  | \$ | 4 Federal income tax withheld<br>\$   |
| RECIPIENT'S name, street address, city, state, and ZIP code<br><br>NOBLE MANAGEMENT CO<br>ONE TOWER PLACE #200<br>LONDON CA 94960                                 |  |  |  | 3 Other income   | \$ |   |
| Account Number (optional)      15 Section 409A deferrals      15B Section 409A income<br>NOB 2350      \$      \$   |  |  |  | 4 Fishing boat proceeds  | \$ | 6 Medical and health care payments<br>\$  |
|   |  |  |  | 5 Nonemployee compensation   | \$ |   |
|   |  |  |  | 6 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$ | 8 Substitute payments in lieu of dividends or interest<br>\$  |
|   |  |  |  | 7 Excess golden parachute payments   | \$ |   |
|   |  |  |  | 8 Gross proceeds paid to an attorney   | \$ | 11  |
|   |  |  |  | 9 State tax withheld   | \$ | 12  |
|   |  |  |  | 10 State/Payer's state no.   | \$ | 18 State income   |
|   |  |  |  |  | \$ | \$  |

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Department of the Treasury-Internal Revenue Service

|   |  |  |  |  |            |   |
|---|--|--|--|--|------------|---|
| 0018 401M 0030 <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED   |  | <input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED |  | OMB No. 1545-0115<br><b style="font-size: 2em;">2008</b><br>Form 1099-MISC   |            | <b>Miscellaneous Income</b><br><br><b>Copy C</b><br>For Privacy Act and Paperwork Reduction Act Notice, see the 2008 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| PAYER'S name, street address, city, state, ZIP code and phone no.<br><br>SHERWOOD FOREST FINANCE CO<br>6209 WAVERLY LANE<br>LONDON CA 94966<br><br>(925) 945-1660 |  |  |  |  |            |   |
| PAYER'S Federal ID number      RECIPIENT'S ID number      2nd TIN Not<br>94-1234567      555-66-7777 <input type="checkbox"/>                                     |  |  |  | 2 Royalties  | \$         | 4 Federal income tax withheld<br>\$   |
| RECIPIENT'S name, street address, city, state, and ZIP code<br><br>JONATHAN ARCHER<br>1614 SPRING ST<br>NOTTINGHAM CA 95622                                       |  |  |  | 3 Other income   | \$         |   |
| Account Number (optional)      15 Section 409A deferrals      15B Section 409A income<br>\$      \$      \$   |  |  |  | 4 Fishing boat proceeds  | \$         | 6 Medical and health care payments<br>\$  |
|   |  |  |  | 5 Nonemployee compensation   | \$ 1250.00 |   |
|   |  |  |  | 6 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> | \$         | 8 Substitute payments in lieu of dividends or interest<br>\$  |
|   |  |  |  | 7 Excess golden parachute payments   | \$         |   |
|   |  |  |  | 8 Gross proceeds paid to an attorney   | \$         | 11  |
|   |  |  |  | 9 State tax withheld   | \$         | 12  |
|   |  |  |  | 10 State/Payer's state no.   | \$         | 18 State income   |
|   |  |  |  |  | \$         | \$  |

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Department of the Treasury-Internal Revenue Service