



Independent Contractor Compliance Checklist (HR)

Contractor Identification & Assessment

Initial evaluation to determine proper classification.

Reason for Engaging Contractor

Write something...

Primary Business Activity of Contractor

- Consulting
- Project-Based Work
- Technical Services
- Creative Services
- Other

Estimated Hours per Week (Average)

Enter a number...

Date of Initial Contact/Proposal Received

Enter date...

Contractor's Role in Project

- Specialized Expertise
- Temporary Staffing
- Project Management
- Specific Task Completion

Is contractor supervised by company employee?

- Yes
- No

Written Contract & Agreement

Ensuring a comprehensive and legally sound agreement is in place.

Scope of Work Description

Write something...

Contract Duration (in months)

Enter a number...

Contract Start Date

Enter date...

Contract End Date

Enter date...

Payment Terms (e.g., Net 30, Hourly)

- Net 30
- Hourly
- Milestone-based
- Other

Company Representative Signature

Contractor Signature

Payment & Tax Withholding

Confirming accurate payment and appropriate tax documentation.

Contractor Hourly Rate

Enter a number...


Payment Frequency

- Weekly
- Bi-weekly
- Monthly

Total Amount Paid (Current Period)

Enter a number...

1099-NEC Form Upload

 Upload File

Payment Method

Direct Deposit

Check

Federal Tax Withheld (Estimated)

Enter a number...

State Tax Withheld (Estimated)

Enter a number...

Control & Direction

Verifying contractor has appropriate control over work performed.

Does the company dictate work hours?

Yes

No

Partially

Does the company provide detailed instructions on how to perform tasks?

- Yes
- No
- Sometimes

Estimated percentage of work directly supervised by company personnel:

Enter a number...

Describe the level of control the company exerts over the contractor's work processes.

Write something...

Does the contractor have flexibility in determining the order in which tasks are completed?

- Yes
- No
- Limited

Explain any deviations from typical employee supervision.

Write something...

Equipment & Resources

Assessing provision of equipment and resources.

Quantity of Equipment Provided

Enter a number...

Type of Equipment Provided (e.g., Laptop, Tools)

- Laptop
- Tools
- Software Licenses
- Mobile Device
- Vehicle
- Other

Description of Resources Provided (e.g., Office Space, Utilities)

Write something...

Is Office Space Provided?

- Yes
- No

Date Equipment/Resources Provided

Enter date...

Intellectual Property Rights

Addressing ownership and usage of intellectual property.

Ownership of Work Product

- Company Owns All Rights
- Contractor Retains Copyright, Grants License to Company
- Joint Ownership


Description of Intellectual Property Rights Granted

Write something...

Confidentiality Agreement Required?

- Yes
- No

Confidentiality/NDA Document (if applicable)

 Upload File

Scope of Licensed Rights (e.g., usage, territory)

Write something...

Right to Modify Work Product?

- Company Has Exclusive Right
- Company Has Right with Contractor Approval
- Contractor Has Sole Right

Insurance & Liability

Checking for appropriate insurance coverage and liability considerations.

Contractor's Insurance Coverage Type

- General Liability
- Professional Liability (E&O)
- Workers' Compensation
- Commercial Auto
- Other

General Liability Insurance Coverage Amount (USD)

Professional Liability (E&O) Insurance Coverage Amount (USD)

Certificate of Insurance Received?

- Yes
- No

Upload Certificate of Insurance

 Upload File

Certificate of Insurance Expiration Date

Ongoing Compliance Review

Regularly reviewing contractor relationships to maintain compliance.

Last Review Date

Enter date...

Review Type

- Routine
- Triggered (e.g., contract renewal)

Hours Spent Reviewing

Enter a number...

Review Notes & Findings

Write something...

Areas Verified

- Contract Terms
- Payment Records
- Work Product
- Control & Direction

Compliance Status

- Compliant
- Minor Issue
- Significant Issue

Record Keeping & Documentation

Maintaining accurate records of contractor agreements and compliance activities.


Contract Start Date

Contract End Date (if applicable)

Signed Contractor Agreement

 Upload File

W-9 Form (or equivalent)

 Upload File

Notes on contractor relationship and compliance activities

Total payments made to contractor (YTD)

Enter a number...

Type of Documentation

- Paper
- Digital
- Hybrid

Misclassification Risk Mitigation

Procedures to minimize potential misclassification issues and penalties.

Review Process Used for Classification?

- Formal Written Assessment
- Informal Review
- No Formal Process

Number of Contractors Currently Engaged

Enter a number...

Date of Last Misclassification Risk Review

Enter date...

Description of Training Provided to Hiring Managers on IC vs. Employee

Write something...

Does Hiring Manager Certification Exist?

Yes

No

Upload Supporting Documentation of Classification Justification

 Upload File