

Attention:

This form is provided for informational purposes only. Copy A appears in red, similar to the official printed IRS form. But do not file Copy A downloaded from this website with the SSA. A penalty of \$50 per information return may be imposed for filing such forms that cannot be scanned.

To order official IRS forms, call 1-800-TAX-FORMS (1-800-829-3676) or order online at [Forms and Publications By U.S. Mail](#).

You may file Forms W-2 and W-3 electronically on the SSA's website at [Employer Reporting Instructions & Information](#). You can create fill-in versions of Forms W-2 and W-3 for filing with the SSA. You may also print out copies for filing with state or local governments, distribution to your employees, and for your records.

DO NOT STAPLE

a Control number		33333	For Official Use Only ▶ OMB No. 1545-0008																
b Kind of Payer	941 <input type="checkbox"/>	Military <input type="checkbox"/>	943 <input type="checkbox"/>	944 <input type="checkbox"/>															
	CT-1 <input type="checkbox"/>	Hshld. emp. <input type="checkbox"/>	Medicare govt. emp. <input type="checkbox"/>	Third-party sick pay <input type="checkbox"/>															
	<table border="1"> <tr> <td>1 Wages, tips, other compensation</td> <td>2 Federal income tax withheld</td> </tr> <tr> <td>3 Social security wages</td> <td>4 Social security tax withheld</td> </tr> <tr> <td>5 Medicare wages and tips</td> <td>6 Medicare tax withheld</td> </tr> <tr> <td>7 Social security tips</td> <td>8 Allocated tips</td> </tr> <tr> <td>9 Advance EIC payments</td> <td>10 Dependent care benefits</td> </tr> <tr> <td>11 Nonqualified plans</td> <td>12 Deferred compensation</td> </tr> <tr> <td colspan="2">13 For third-party sick pay use only</td> </tr> <tr> <td colspan="2">14 Income tax withheld by payer of third-party sick pay</td> </tr> </table>				1 Wages, tips, other compensation	2 Federal income tax withheld	3 Social security wages	4 Social security tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	7 Social security tips	8 Allocated tips	9 Advance EIC payments	10 Dependent care benefits	11 Nonqualified plans	12 Deferred compensation	13 For third-party sick pay use only		14 Income tax withheld by payer of third-party sick pay
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c Total number of Forms W-2		d Establishment number		15 State Employer's state ID number															
e Employer identification number (EIN)		16 State wages, tips, etc.		17 State income tax															
f Employer's name		18 Local wages, tips, etc.		19 Local income tax															
g Employer's address and ZIP code		Telephone number ()		For Official Use Only															
h Other EIN used this year		Fax number ()																	
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax															
		18 Local wages, tips, etc.		19 Local income tax															
Contact person		Telephone number ()		For Official Use Only															
Email address		Fax number ()																	

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶

Title ▶

Date ▶

Form **W-3 Transmittal of Wage and Tax Statements**

2006

Department of the Treasury
Internal Revenue Service

Send this entire page with the entire Copy A page of Form(s) W-2 to the Social Security Administration. Photocopies are not acceptable.

Do not send any payment (cash, checks, money orders, etc.) with Forms W-2 and W-3.

What's New

New checkbox for box b on Form W-3. Use the "944" checkbox in box b if you file Form 944, Employer's Annual Federal Tax Return. Form 944 for 2006 is a newly developed form.

Magnetic media filing is discontinued. The Social Security Administration (SSA) will no longer accept any magnetic media reporting of Forms W-2.

Reminder

Separate instructions. See the 2006 Instructions for Forms W-2 and W-3 for information on completing this form.

Purpose of Form

Use Form W-3 to transmit Copy A of Form(s) W-2, Wage and Tax Statement. Make a copy of Form W-3 and keep it with Copy D (For Employer) of Form(s) W-2 for your records. Use Form W-3 for the correct year. **File Form W-3 even if only one Form W-2 is being filed.** If you are filing Form(s) W-2 electronically, **do not** file Form W-3.

When To File

File Form W-3 with Copy A of Form(s) W-2 by February 28, 2007.

Where To File

Send this entire page with the entire Copy A page of Form(s) W-2 to:

**Social Security Administration
Data Operations Center
Wilkes-Barre, PA 18769-0001**

Note. If you use "Certified Mail" to file, change the ZIP code to "18769-0002." If you use an IRS-approved private delivery service, add "ATTN: W-2 Process, 1150 E. Mountain Dr." to the address and change the ZIP code to "18702-7997." See Publication 15 (Circular E), Employer's Tax Guide, for a list of IRS-approved private delivery services.

For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D of Form W-2.