# **Attention:**

This form is provided for informational purposes only. Copy A appears in red, similar to the official IRS form. Do **not** file copy A downloaded from this website with the SSA. The official printed version of this IRS form is scannable, but the online version of it, printed from this website, is not. A penalty may be imposed for filing forms that can't be scanned. See the penalties section in the current General Instructions for Forms W-2 and W-3 for more information.

To order official IRS forms, call 1-800-TAX-FORM (1-800-829-3676) or <u>Order Information</u> <u>Returns and Employer Returns Online</u>, and we'll mail you the scannable forms and other products.

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

See IRS Publications 1141, 1167, 1179 and other IRS resources for information about printing these tax forms.

33333	a Control number	For Official Use Only ▶	MB No. 1545-0008				
b	941-SS Military 943	OMB No. 1545-0008					
Kind of Payer (Check one)	941-SS Military 940 Hshid. Medic. emp. govt. e	Kind of	State/local non-501c	State/local 501c	Federal govt.	Third-party sick pay  (Check if applicable)	
<b>c</b> Total number of	Forms W-2 d Establishmen	number 1 Wages, tips	s, other compensation	<b>2</b> Inc	ome tax withheld	•	
<b>e</b> Employer identif	ication number (EIN)	3 Social secu	3 Social security wages		4 Social security tax withheld		
f Employer's nam	е	5 Medicare w	5 Medicare wages and tips		6 Medicare tax withheld		
		<b>7</b> Social secu	rity tips	8			
_		9		10			
<b>g</b> Employer's addr	ress and ZIP code	11 Nonqualifier	11 Nonqualified plans		12a Deferred compensation		
h Other EIN used	this year	13 For third-pa	13 For third-party sick pay use only				
<b>15</b> Employer's terri	torial ID number	14 Income tax	14 Income tax withheld by payer of third-party sick pay				
			18 Check the appropriate box  Type of Form ▶ W-2AS W-2CM W-2GU W-2VI				
Contact person			Telephone number		For Official Use Only		
Email address		Fax number	Fax number				

Copy A—For Social Security Administration

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-3SS Transmittal of Wage and Tax Statements

5075

Department of the Treasury Internal Revenue Service

Send this entire page with the entire Copy A page of Form(s) W-2AS, W-2CM, W-2GU, or W-2VI to the Social Security Administration (SSA). Photocopies are not acceptable. Do not send Form W-3SS if you filed electronically with the SSA.

Do not send any payment (cash, checks, money orders, etc.) with Form(s) W-2AS, W-2CM, W-2GU, W-2VI, and W-3SS.

#### Reminder

**Separate instructions.** See the 2012 General Instructions for Forms W-2 and W-3 for information on completing this form.

## **Purpose of Form**

A Form W-3SS Transmittal is completed only when paper Copy A of Form(s) W-2AS, W-2GU, or W-2VI is being filed. Do not file Form W-3SS alone. Do not file Form W-3SS for Form(s) W-2AS, W-2GU or W-2VI that were submitted electronically to the SSA (see below). All paper forms **must** comply with IRS standards and be machine readable. Photocopies are **not** acceptable. Use a Form W-3SS even if only one paper Form W-2AS, W-2GU, or W-2VI is being filed. Make sure both the Form W-3SS and Form(s) W-2AS, W-2GU, or W-2VI show the correct tax year and Employer Identification Number (EIN). Make a copy of this form and keep it with Copy D (For Employer) of Form(s) W-2AS, W-2GU, or W-2VI for your records. The IRS recommends retaining copies of these forms for four years.

#### E-Filina

The SSA strongly suggests employers report Form W-3SS and Form(s) W-2AS, W-2GU, or W-2VI Copy A electronically instead of on paper. The SSA provides two free e-filing options on its Business Services Online (BSO) website:

• W-2 Online. Use fill-in forms to create, save, print, and submit up to 50 Forms W-2AS, W-2GU, or W-2VI at a time to the SSA. The SSA currently does not offer this service for Form W-2CM.

• **File Upload.** Upload wage files to the SSA you have created using payroll or tax software that formats the files according to the SSA's *Specifications* for Filing Forms W-2 Electronically (EFW2).

W-2 Online fill-in forms or file uploads will be on time if submitted by April 1, 2013. For more information, go to www.socialsecurity.gov/employer and select "First Time Filers" or "Returning Filers" under "BEFORE YOU FILE."

#### When To File

Mail Copy A of Form W-3SS with Copy A of Form(s) W-2AS, W-2CM, W-2GU, or W-2VI by February 28, 2013.

#### Where To File Paper Forms

Send this entire page with the entire Copy A page of Form(s) W-2AS, W-2CM, W-2GU, or W-2VI 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 Pub. 15 (Circular E), Employer's Tax Guide, for a list of IRS-approved private delivery services.

#### DO NOT STAPLE OR FOLD

33333	a Control number	For Official Use Only ▶					
		OMB No. 1545-0008	45-0008				
b Kind of Payer (Check one)	941-SS Military 943  Hshld. Medicare emp. govt. emp.	Wind of Employer (Check one)  The Wages, tips, other of the control of the contro	None apply 501c non-govt.  State/local non-501c State/local 501c  compensation 2 Inc.	Third-party sick pay  (Check if applicable)  ome tax withheld			
			·				
e Employer identific	cation number (EIN)	3 Social security wag	3 Social security wages 4 Social security tax withheld				
f Employer's name	9	5 Medicare wages an	d tips 6 Me	6 Medicare tax withheld			
		7 Social security tips	8				
		9	10				
<b>g</b> Employer's addre	ess and ZIP code	11 Nonqualified plans	<b>12a</b> De	12a Deferred compensation			
h Other EIN used to	his year	13 For third-party sick	pay use only 12b				
15 Employer's territorial ID number		14 Income tax withheld	14 Income tax withheld by payer of third-party sick pay				
Contact person		Telephone number	For	Official Use Only			
Email address		Fax number					
Copy 1—For Local Tax Department  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.							
Under penalties of per	jury, i declare that i have examined this	return and accompanying documents, and,	to the best of thy knowledge and bell	ei, liney are true, correct, and complete.			
Signature ►		Title ►		Date ►			

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Department of the Treasury Internal Revenue Service

## Where To File.

For more information about where to file Copy 1, contact your state, city, or local tax department.

American Samoa. File Copy 1 of Form W-3SS and Forms W-2AS at the following address.

American Samoa Tax Office Executive Office Building First Floor Pago Pago, AS 96799

Guam. File Copy 1 of Form W-3SS and Forms W-2GU at the following address.

Guam Department of Revenue and Taxation P.O. Box 23607 GMF, GU 96921

 $\textbf{U.S. Virgin Islands.} \ \textbf{File Copy 1 of Form W-3SS} \ \textbf{and Forms W-2VI at the following address}.$ 

Form W-3SS Transmittal of Wage and Tax Statements

Virgin Islands Bureau of Internal Revenue 9601 Estate Thomas St. Thomas, VI 00802

Commonwealth of the Northern Mariana Islands. File Form OS-3710 and Copy 1 of Forms W-2CM at the following address.

Division of Revenue and Taxation Commonwealth of the Northern Mariana Islands P.O. Box 5234 CHRB Saipan, MP 96950