DO NOT STAPLE

_										
а	Control number	33333	For Official Use OMB No. 1545-	•						
b	Kind of		ilitary 943		Wage	es, tips, other compensation	n 2	Federal in	ncome tax withheld	
	Payer	(°I 1	hld. Medicare np. govt. emp.		Soci	al security wages	4	Social se	curity tax withheld	
С	Total number of Forms W-2 d Establishment number			5	Med	care wages and tips	6	Medicare	tax withheld	
е	e Employer identification number				Soci	al security tips	8	Allocated	tips	
f	f Employer's name				Adva	ince EIC payments	10 Dependent care benefits			
					11 Nonqualified plans			12 Deferred compensation		
				13	13					
g Employer's address and ZIP code					14					
h	n Other EIN used this year				15 Income tax withheld by third-party payer					
i	Employer's state I.D. no	0.								
(Contact person	Telephon	e number	F	ax nu	mber \		E-mail addı	ress	

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 1999

Department of the Treasury

Send this entire page with the entire Copy A page of Forms W-2 to the Social Security Administration. Photocopies are NOT acceptable. Do not send any remittance (cash, checks, money orders, etc.) with FORMS W-2 and W-3.

Changes To Note

"YOUR COPY" eliminated. Form W-3 no longer contains a second "YOUR COPY" of the form. Be sure to make a copy of the completed form for your records.

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

Purpose of Form

Use this form to transmit Copy A of Forms W-2. Make a copy of Form W-3, and keep it with Copy D (For Employer) of Forms 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 Forms W-2 on magnetic media or electronically, do not file Form W-3.

When To File

File Form W-3 with Copy A of Forms W-2 by February 29, 2000.

Where To File

Send this entire page with the entire Copy A page of Forms 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 Circular E (Pub. 15) for a list of IRS approved private delivery services.

For Privacy Act and Paperwork Reduction Act Notice, see the 1999 Instructions for Forms W-2 and W-3.