

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 ()																	
Contact person																			
Email address																			

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.