

## 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 [Order Information Returns and Employer Returns Online](#), 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 [Employer Reporting Instructions & Information](#). 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.

**DO NOT STAPLE**

|   |                               |                                      |  |  |  |   |   |  |
|---|-------------------------------|--------------------------------------|--|--|--|---|---|--|
| <b>33333</b>                                    |                               | <b>a</b> Control number              |  | <b>For Official Use Only ▶</b><br>OMB No. 1545-0008            |  |   |   |  |
| <b>b</b><br><b>Kind of Payer</b><br>(Check one) | 941 <input type="checkbox"/>  | Military <input type="checkbox"/>    | 943 <input type="checkbox"/>                 | 944 <input type="checkbox"/>                                   | <b>Kind of Employer</b><br>(Check one) | None apply <input type="checkbox"/>           | 501c non-govt. <input type="checkbox"/>   | Third-party sick pay<br>(Check if applicable) <input type="checkbox"/> |
|   | CT-1 <input type="checkbox"/> | Hshld. emp. <input type="checkbox"/> | Medicare govt. emp. <input type="checkbox"/> |  |  | State/local non-501c <input type="checkbox"/> | State/local 501c <input type="checkbox"/> |  |
| <b>c</b> Total number of Forms W-2              |                               | <b>d</b> Establishment number        |  | <b>1</b> Wages, tips, other compensation                       |  | <b>2</b> Federal income tax withheld          |   |  |
| <b>e</b> Employer identification number (EIN)   |                               |                                      |  | <b>3</b> Social security wages                                 |  | <b>4</b> Social security tax withheld         |   |  |
| <b>f</b> Employer's name                        |                               |                                      |  | <b>5</b> Medicare wages and tips                               |  | <b>6</b> Medicare tax withheld                |   |  |
| <b>g</b> Employer's address and ZIP code        |                               |                                      |  | <b>7</b> Social security tips                                  |  | <b>8</b> Allocated tips                       |   |  |
|   |                               |                                      |  | <b>9</b>   |  | <b>10</b> Dependent care benefits             |   |  |
|   |                               |                                      |  | <b>11</b> Nonqualified plans                                   |  | <b>12a</b> Deferred compensation              |   |  |
| <b>h</b> Other EIN used this year               |                               |                                      |  | <b>13</b> For third-party sick pay use only                    |  | <b>12b</b>                                    |   |  |
| <b>15</b> State                                 | Employer's state ID number    |                                      |  | <b>14</b> Income tax withheld by payer of third-party sick pay |  |   |   |  |
| <b>16</b> State wages, tips, etc.               |                               | <b>17</b> State income tax           |  | <b>18</b> Local wages, tips, etc.                              |  | <b>19</b> 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**

**2011**

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.

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

**Reminder**

Separate instructions. See the 2011 Instructions for Forms W-2 and W-3 for information on completing this form.

**Purpose of Form**

A Form W-3 Transmittal is completed only when paper Copy A of Form(s) W-2, Wage and Tax Statement, is being filed. Do not file Form W-3 alone. Do not file Form W-3 for Form(s) W-2 that were submitted electronically to the Social Security Administration (see below). All paper forms **must** comply with IRS standards and be machine readable. Photocopies are **not** acceptable. Use a Form W-3 even if only one paper Form W-2 is being filed. Make sure both the Form W-3 and Form(s) W-2 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-2 for your records.

**Electronic Filing**

The Social Security Administration (SSA) strongly suggests employers report Form W-3 and W-2 Copy A electronically instead of on paper. SSA provides two free options on its Business Services Online (BSO) website:

- **W-2 Online.** Use fill-in forms to create, save, print, and submit up to 20 Forms W-2 at a time to SSA.
- **File Upload.** Upload wage files to SSA that you have created using payroll or tax software that formats the files according to SSA's *Specifications for Filing Forms W-2 Electronically (EFW2)*.

For more information, go to [www.socialsecurity.gov/employer](http://www.socialsecurity.gov/employer) and select "First Time Filers" or "Returning Filers" under "BEFORE YOU FILE."

**When To File**

Mail any paper Forms W-2 under cover of this Form W-3 Transmittal by February 29, 2012. Electronic fill-in forms or uploads are filed through SSA's Business Services Online (BSO) Internet site and will be on time if submitted by April 2, 2012.

**Where To File Paper Forms**

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 the back of Copy D of Form W-2.**