

**DO NOT STAPLE**

<b>33333</b>		<b>a</b> Control number		<b>For Official Use Only ▶</b> OMB No. 1545-0008	
<b>b</b> <b>Kind of Payer</b>	941 <input type="checkbox"/>	Military <input type="checkbox"/>	943 <input type="checkbox"/>	944 <input type="checkbox"/>	<b>1</b> Wages, tips, other compensation
	CT-1 <input type="checkbox"/>	Hshld. emp. <input type="checkbox"/>	Medicare govt. emp. <input type="checkbox"/>	<b>Third-party sick pay</b> <input type="checkbox"/>	<b>2</b> Federal income tax withheld
<b>c</b> Total number of Forms W-2		<b>d</b> Establishment number		<b>3</b> Social security wages	<b>4</b> Social security tax withheld
<b>e</b> Employer identification number (EIN)				<b>5</b> Medicare wages and tips	<b>6</b> Medicare tax withheld
<b>f</b> Employer's name				<b>7</b> Social security tips	<b>8</b> Allocated tips
				<b>9</b> Advance EIC payments	<b>10</b> Dependent care benefits
				<b>11</b> Nonqualified plans	<b>12a</b> Deferred compensation
				<b>13</b> For third-party sick pay use only	<b>12b</b> HIRE exempt wages and tips
<b>g</b> Employer's address and ZIP code				<b>14</b> Income tax withheld by payer of third-party sick pay	
<b>h</b> Other EIN used this year					
<b>15</b> State	Employer's state ID number			<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** **2010**

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 2010 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, are 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 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 Form 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 28, 2011. 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 March 31, 2011.

**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.