

**DO NOT STAPLE**

<b>33333</b>		a Control number		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"/>	1 Wages, tips, other compensation	2 Federal income tax withheld	
	CT-1 <input type="checkbox"/>	Hshld. emp. <input type="checkbox"/>	Medicare govt. emp. <input type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	3 Social security wages	4 Social security tax withheld	
c Total number of Forms W-2		d Establishment number		5 Medicare wages and tips		6 Medicare tax withheld	
e Employer identification number (EIN)				7 Social security tips		8 Allocated tips	
f Employer's name				9 Advance EIC payments		10 Dependent care benefits	
				11 Nonqualified plans		12 Deferred compensation	
				13 For third-party sick pay use only			
g Employer's address and ZIP code				14 Income tax withheld by payer of third-party sick pay			
h Other EIN used this year							
15 State	Employer's state ID number			16 State wages, tips, etc.		17 State income tax	
				18 Local wages, tips, etc.		19 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** **2007**

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**

**Relocation of form ID on Form W-3.** For consistency with the revisions to Form W-2, we relocated the form ID number ("33333") to the top left corner of Form W-3.

**Reminder**

**Separate instructions.** See the 2007 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 29, 2008.

**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.