DO NOT STAPLE OR FOLD										
а	Control number	33333	For Official Use OMB No. 1545-0	2						
b	Kind	941 Military 943			1 Wages, tips, other compensation			2 Federal income tax withheld		
	Payer	CT-1 en	nld. Medicare p. govt. emp.		Social	security wages	4	Social se	curity tax withheld	
с	Total number of Forms W-2 d Establishment number			5	5 Medicare wages and tips			6 Medicare tax withheld		
e	Employer identification number				Social security tips		8 Allocated tips			
f	f Employer's name				9 Advance EIC payments		10 Dependent care benefits			
					11 Nonqualified plans			12 Deferred compensation		
				13	13					
g Employer's address and ZIP code					14					
h	Other EIN used this year				15 Income tax withheld by third-party payer					
i	Employer's state I.D. no	).								
(	Contact person Telephone number ( )			F (	Fax number			E-mail 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 🕨

Department of the Treasury

Internal Revenue Service

# Form W-3 Transmittal of Wage and Tax Statements 2000

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 remittance (cash, checks, money orders, etc.) with Forms W-2 and W-3.

## An Item To Note

Separate instructions. See the separate 2000 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 **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 on magnetic media or 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, 2001.

#### 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 **Circular E**, Employer's Tax Guide (Pub. 15), for a list of IRS approved private delivery services.

For Privacy Act and Paperwork Reduction Act Notice, see the 2000 Instructions for Forms W-2 and W-3.