

a Control number		OMB No. 1545-0008				
b Kind of Payer >	941 <input checked="" type="checkbox"/>	Military <input type="checkbox"/>	943 <input type="checkbox"/>	1 Wages, tips, other compensation 83210.00	2 Federal income tax withheld 10980.00	
	CT-1 <input type="checkbox"/>	Hshld. <input type="checkbox"/>	Medicare govt. emp. <input type="checkbox"/>	3 Social security wages 83210.00	4 Social security tax withheld 5159.02	
c Total number of Forms W-2 2	d Establishment number		5 Medicare wages and tips 83210.00	6 Medicare tax withheld 1206.55		
e Employer's identification number 56-1234567			7 Social security tips		8 Allocated tips	
f Employer's name ABC Corporation, Inc.			9 Advance EIC payments		10 Dependant care benefits	
g Employer's address and ZIP code  1020 Crews Road, Suite L Matthews, NC 28105			11 Nonqualified plans		12 Deferred compensation	
			13			
			14			
h Other EIN used this year			15 Income tax withheld by third-party payer			
i Employers state I.D. No. 06 60044						
Contact person John Jones		Telephone Number 704-444-4444		Fax Number 704-555-5555		
E-Mail address John@aol.com						

Form **W-3** Transmittal of Wage and Tax Statements 1999

Department of the Treasury  
Internal Revenue Service