

| | | | | | | | | | | | | |
|--|--|--|--|---|---|--|--|--|--|--|---|--|
| 33333 | | a Control number XXXXXXXXXXXXXXXX | For Official Use Only ▶ OMB No. 1545-0008 | | | | | | | | | |
| b Kind of Payer (Check one) | | 941 <input checked="" type="checkbox"/> CT-1 | 941 Military <input checked="" type="checkbox"/> | 943 Hshld. emp. <input checked="" type="checkbox"/> | 944 Medicare govt. emp. <input checked="" type="checkbox"/> | Kind of Employer (Check one) | None apply <input checked="" type="checkbox"/> | 501c non-govt. <input checked="" type="checkbox"/> | State/local non-501c <input checked="" type="checkbox"/> | State/local 501c <input checked="" type="checkbox"/> | Federal govt. <input checked="" type="checkbox"/> | Third-party sick pay (Check if applicable) <input checked="" type="checkbox"/> |
| c Total number of Forms W-2 200 | | d Establishment number 8888 | | 1 Wages, tips other compensation 9999999999999999.99 | | 2 Federal income tax withheld 9999999999999999.99 | | | | | | |
| e Employer Identification number 12-3456789 | | 3 Social security wages 9999999999999999.99 | | 4 Social security tax withheld 9999999999999999.99 | | | | | | | | |
| f Employer's name INTEGRATED DATA MANAGEMENT SYSTEMS | | 5 Medicare wages and tips 9999999999999999.99 | | 6 Medicare tax withheld 9999999999999999.99 | | | | | | | | |
| g Employer's address and ZIP code DBA IDMS ACCOUNT ABILITY 555 BROADHOLLOW ROAD SUITE 273 MELVILLE NY 11747-5001 | | 7 Social security tips 9999999999999999.99 | | 8 Allocated tips 9999999999999999.99 | | | | | | | | |
| | | 9 | | 10 Dependent care benefits 9999999999999999.99 | | | | | | | | |
| | | 11 Nonqualified plans 9999999999999999.99 | | 12a Deferred compensation 9999999999999999.99 | | | | | | | | |
| h Other EIN used this year 12-3456789 | | 13 For third-party sick pay use only THIRD PARTY SICK PAY RECAP | | 12b | | | | | | | | |
| 15 State Employer's state ID number NY NY STATE ID | | 14 Income tax withheld by payer of third-party sick pay 9999999999999999.99 | | | | | | | | | | |
| 16 State wages, tips, etc. 99999999999999.99 | | 17 State income tax 99999999999999.99 | | 18 Local wages, tips, etc. 9999999999999999.99 | | 19 Local income tax 9999999999999999.99 | | | | | | |
| Employer's contact person CONTACT NAME | | Employer's telephone number (631) 249-7744 | | For Official Use Only 0000/1107 | | | | | | | | |
| Employer's fax number (631) 249-4425 | | Employer's email address sales@idmsinc.com | | | | | | | | | | |

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

2017

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 (SSA). Photocopies are not acceptable. Do not send Form W-3 if you filed electronically with the SSA.

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

Reminder

Separate instructions. See the 2017 General Instructions for Forms W-2 and W-3 for information on completing this form. Do not file Form W-3 for Form(s) W-2 that were submitted electronically to the SSA.

W-2 Online fill-in forms or file uploads will be on time if submitted by January 31, 2018. For more information, goto www.socialsecurity.gov/ employer. First time filers, select "Go to Register"; returning filers select "Go to Log In."

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. 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. The IRS recommends retaining copies of these forms for four years.

E-Filing

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

- **W-2 Online.** Use fill-in forms to create, save, print, and submit up to 50 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 the SSA's Specifications for Filing Form W-2 Electronically (EFW2).

When To File

Mail Form W-3 with Copy A of Form(s) W-2 by January 31, 2018.

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 separate instructions.