

**SUBSTITUTE FOR FORM W-2, WAGE AND TAX STATEMENT OR
FORM W-2P, STATEMENT FOR RECIPIENTS OF ANNUITIES,
PENSIONS, RETIRED PAY, OR IRA PAYMENTS**

Dept. of the Treasury
Internal Revenue Service

◀ Attach to Form 1040, 1040A, 1040EZ or 1040X ▶

1. NAME (First, middle, last)

2. SOCIAL SECURITY NUMBER

3. ADDRESS (Number, street, city, State, ZIP code)

4. PLEASE FILL IN THE YEAR AT THE END OF THIS STATEMENT

I have been unable to obtain or have received an incorrect Form W-2, Wage and Tax Statement, or Form W-2P Statement for Recipients of Annuities, Pensions, Retired Pay or IRA Payments, from my employer or payer named below, and have so notified the Internal Revenue Service. The amounts shown below are my best estimates of all wages or payments paid to me and the Federal taxes withheld by this employer or payer during 19_____.

5. EMPLOYER'S OR PAYER'S NAME, ADDRESS, AND ZIP CODE

6. EMPLOYER'S OR PAYER'S IDENTIFICATION NUMBER (If known)

7. ADVANCE EIC
(Earned Income Credit)
PAYMENTS RECEIVED

8. FEDERAL INCOME
TAX WITHHELD

9. WAGES, TIPS, OTHER
COMPENSATION OR
PAYMENTS (See Note Below)

10. SOCIAL
SECURITY TAX
WITHHELD

11. SOCIAL
SECURITY
WAGES

12. SOCIAL
SECURITY
TIPS

NOTE: Include the total of (1) wages paid, (2) noncash payments, (3) tips/reported, and (4) all other compensation before deductions for taxes, insurance, etc.

13 How did you determine the amounts in items 7 through 12 above?

14. Give reason Form W-2, W-2P (or W-2c, Statement of Corrected Income and Tax Amounts) was not furnished by employer or payer, if known, and explain your efforts to get it.

Paperwork Reduction Notice

We ask for this information to carry out the Internal Revenue laws of the United States. We need it to ensure that taxpayers are complying with these laws and to allow us to figure and collect the right amount of tax. You are required to give us this information. The time needed to complete this form will vary depending on individual circumstances. The estimated average time is 18 minutes. If you have comments concerning the accuracy of this time estimate or suggestions for making this form more simple, we would be happy to hear from you. You can write to both the Internal Revenue Service, Washington, DC 20224, Attention: IRS Reports Clearance Officer, T:FP and the Office of Management and Budget, Paperwork Reduction Project (1545-0458), Washington, DC 20503. **DO NOT** send this form to either of these offices.

IMPORTANT NOTICE: If your employer has ceased operations or filed for bankruptcy, you may wish to send a copy of this form to the Social Security Administration office listed in your telephone directory to ensure proper social security credit.

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

15. Your signature

16. Date