

22222	VOID <input type="checkbox"/>	a Employee's social security number	For Official Use Only OMB No. 1545-0029		
b Employer identification number (EIN)		1 Wages, tips, other compensation	2 Federal income tax withheld		
c Employer's name, address, and ZIP code		3 Social security wages	4 Social security tax withheld		
		5 Medicare wages and tips	6 Medicare tax withheld		
		7 Social security tips	8 Allocated tips		
d Control number		9	10 Dependent care benefits		
e Employee's first name and initial		Last name	Suff.	11 Nonqualified plans	12a See instructions for box 12
f Employee's address and ZIP code		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b Code	
		14 Other		12c Code	
				12d Code	
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	20 Locality name

Form **W-2 Wage and Tax Statement** **2025** Department of the Treasury—Internal Revenue Service
 Copy A—For Social Security Administration. Send this entire page with Form W-3 to the Social Security Administration; photocopies are not acceptable. 41-0852411
 Copy B—For State, City, or Local Tax Department
 Copy C—For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.
Do Not Cut, Fold, or Staple Forms on This Page

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 5201

e Employee's name, address, and ZIP code						
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	20 Locality name

Form **W-2 Wage and Tax Statement** **2025** Department of the Treasury—Internal Revenue Service
 Copy 1—For State, City, or Local Tax Department
 Copy D—For Employer.

d Control number					
e Employee's name, address, and ZIP code					
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12	
13 Statutory employee		14 Other		12b Code	
Retirement plan				12c Code	
Third-party sick pay				12d Code	
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		20 Locality name	

Form **W-2 Wage and Tax Statement** **2025** Dept. of the Treasury—IRS
 This information is being furnished to the IRS. It may be required to file a tax return, a mortgage, penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

d Control number					
e Employee's name, address, and ZIP code					
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code	
13 Statutory employee		14 Other		12b Code	
Retirement plan				12c Code	
Third-party sick pay				12d Code	
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		20 Locality name	

Form **W-2 Wage and Tax Statement** **2025** Dept. of the Treasury—IRS
 5205

paper forms must comply with IRS standards and be machine readable. Photocopies are not acceptable. Use a Form W-2 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 at least 4 years.

E-Filing

The SSA strongly suggests employers report Form W-3 and Form(s) W-2 Copy A electronically instead of on paper. The 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 the SSA.
- **File Upload.** Upload wage files to the SSA you have created using payroll or tax software that formats the files according to the SSA's Specifications for Filing Forms W-2 Electronically (EFW2).

W-2 Online fill-in forms or file uploads will be on time if submitted by **February 02, 2026**. For more information, go to www.SSA.gov/bsa.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

41-0852411

None apply		501c non-govt.	Third-party sick pay
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Statutory non-501c		Federal govt.	(Check if applicable)
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Other compensation		2 Federal income tax withheld	
wages		4 Social security tax withheld	
tips and tips		6 Medicare tax withheld	
tips		8 Allocated tips	
benefits		10 Dependent care benefits	
deferred compensation		12a Deferred compensation	
sick pay use only		12b	
held by payer of third-party sick pay			
State, etc.		19 Local income tax	
phone number		For Official Use Only	
if address			

Date: _____
 Department of the Treasury
 Internal Revenue Service
2025
 Social Security Administration (SSA),
 electronically with the SSA.
 Form W-3 and W-3.

When To File Paper Forms

Mail Form W-3 with Copy A of Form(s) W-2 by **February 02, 2026**.

Where To File Paper Forms

Send this entire page with the entire Copy A page of Form(s) W-2 to:

Social Security Administration
Direct 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." Go to www.irs.gov/PDS for a list of IRS-approved private delivery services.