

3232

VOID CORRECTED

PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		1 Reportable winnings	2 Date won
		\$	
		3 Type of wager	4 Federal income tax withheld
			\$
PAYER'S TIN		PAYER'S telephone no.	
		5 Transaction	6 Race
WINNER'S name		7 Winnings from identical wagers	8 Cashier
		\$	
Street address (including apt. no.)		9 WINNER'S TIN	10 Window
City or town, state or province, country, and ZIP or foreign postal code		11 First identification no.	12 Second identification no.
Street address (including apt. no.)		13 State/Payer's state identification no.	14 State winnings
			\$
City or town, state or province, country, and ZIP or foreign postal code		15 State income tax withheld	16 Local winnings
Street address (including apt. no.)		\$	\$
		17 Local income tax withheld	18 Name of locality
		\$	

OMB No. 1545-0238
Form W-2G
Certain Gambling Winnings
 (Rev. December 2023)
 For calendar year 20 _____

For Privacy Act and Paperwork Reduction Act Notice, see the current **General Instructions for Certain Information Returns.**

File with Form 1096

Copy A
For Internal Revenue Service Center

Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments.

Signature:

Date:

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