

33333		a Control number		For Official Use Only ► OMB No. 1545-0008			
b Kind of Payer (Check one)		941 <input checked="" type="checkbox"/> 942 <input type="checkbox"/> 943 <input type="checkbox"/> 944 <input type="checkbox"/>		Kind of Employer (Check one)		None apply <input checked="" type="checkbox"/> 501c non-govt. <input type="checkbox"/>	
CT-1 <input type="checkbox"/>		Hshld. Emp. <input type="checkbox"/> Medicare govt. emp. <input type="checkbox"/>		State/local non-501c <input type="checkbox"/> State/local 501c <input type="checkbox"/> Federal govt. <input type="checkbox"/>		Third-party sick pay (Check if applicable) <input type="checkbox"/>	
c Total number of Forms W-2 3		d Establishment number		1 Wages, tips, other compensation 14130.00		2 Federal income tax withheld	
e Employer identification number (EIN) 45-5385596				3 Social security wages 14130.00		4 Social security tax withheld 876.06	
f Employer's name REDEMPTION CHURCH OF PLANO, 1113 LOMBARDY DR PLANO TX 75023				5 Medicare wages and tips 14130.00		6 Medicare tax withheld 204.88	
g Employer's address and ZIP code				7 Social security tips		8 Allocated tips	
h Other EIN used this year				9		10 Dependent care benefits	
15 State Employer's state ID number				11 Nonqualified plans		12a Deferred compensation	
16 State wages, tips, etc.				13 For third-party sick pay use only		12b	
17 State income tax				14 Income tax withheld by payer of third-party sick pay			
18 Local wages, tips, etc.				19 Local income tax		Employer's telephone number (469) 467-8111	
Employer's contact person CHRIS FLUITT				Employer's email address pastor@redemption-church.com		For Official Use Only 0000/1030D	
Employer's fax number							

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 ► PASTOR

Date ►

Form W-3 Transmittal of Wage and Tax Statements 2020

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 2020 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.

Purpose of Form

Complete a Form W-3 Transmittal only when filing paper Copy A of Form(s) W-2, Wage and Tax Statement. Don't 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 4 years.

E-Filing

The SSA strongly suggests employers report Form W-3 and Forms 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 1, 2021**. For more information, go to www.SSA.gov/bsa. First time filers, select "Register"; returning filers select "Log In."

When To File Paper Forms

Mail Form W-3 with Copy A of Form(s) W-2 by **February 1, 2021**.

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." See Pub. 15 (Circular E), Employer's Tax Guide, for a list of IRS-approved private delivery services.