

Social Security Administration  
**Retirement, Survivors and Disability Insurance**

Date: April 15, 2008

Employee's Name: «NAME»

Employee's Social Security Number: «BOAN»

«Address1»

«Address2»

«Address3»

«Address4»

«Address5»

«City», «State» «Zip»

Please complete the attached form for tax year XXXX. The information that you provide will be used in making a determination regarding the amount of Social Security benefits payable to the above named individual.

We would appreciate receiving this information by «ReplyBy». An envelope requiring no postage is enclosed for your convenience. If you have any questions, please call us at 1-800-772-1213 between 7:00 a.m. and 10:30 p.m. eastern time.

## EMPLOYER REPORT OF SPECIAL WAGE PAYMENTS

### PART 1 – TO BE COMPLETED BY SSA/EMPLOYER:

Tax Year 2004	Employee Name «NAME»	Employee's SSN «BOAN»	SSA Claim Number (To be completed by SSA) «CAN» «BIC»
Employer «Address1»		Address «Address2» «Address3» «Address4» «Address5» «City», «State» «Zip»	

### PART 2 – TO BE COMPLETED BY EMPLOYER

Employees are sometimes paid wages *in a year* subsequent to the year that the wages were earned. The most common types of payments are accumulated (for prior years) vacation pay or sick pay paid after retirement; deferred compensation; severance pay (when paid on account of retirement) and bonuses --- paid pursuant to a prior agreement or contract.

Wages which are earned in a year prior to the year they are paid usually do not affect benefits payable under the Social Security annual earnings test. However, for the Social Security Administration to pay benefits accurately, these prior year amounts must be reported to us. The above named individual has filed for Social Security benefits. To ensure that correct Social Security benefits are paid, please complete the information below and return this form to the Social Security Administration.

1. Employer Identification Number (EIN) □□□□□□□□	2. Retirement date (MM/DD/YY) □□/□□/□□	3. Date employee last performed services (MM/DD/YY) □□/□□/□□
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If the dates in items 2 and 3 are not the same, please explain the difference.

4. For wages paid to the employee in the "tax year" (see Part 1 above), enter the amount that was for services performed prior to the tax year; or was not attributable to services rendered during the tax year; or was paid on account of retirement: \_\_\_\_\_ → \$ □□□,□□□.□□

Check the type(s) of wages paid in the tax year but for services performed in a prior year or were paid on account of retirement.

Vacation Pay     
  Sick Pay     
  Severance Pay  
 Bonus     
  Deferred Compensation  
 Other (Explain) \_\_\_\_\_

REDUCE  
SIZE FOR  
BLOCKS -  
INCREASE SIZE  
IN ITEM 5

5. Will payments listed in item "4" be made for years after the tax year?       Yes       No

If answered Yes, please show the amounts and years in which these amounts will be paid, if known.

Amount	Year	Amount	Year
\$ □□□.□□□.□□	□□□□	\$ □□□.□□□.□□	□□□□
\$ □□□.□□□.□□	□□□□	\$ □□□.□□□.□□	□□□□
\$ □□□.□□□.□□	□□□□	\$ □□□.□□□.□□	□□□□

6. Nonqualified deferred compensation and section 457 plans only. If payments and deferrals occurred during the tax year, enter the amount of wages earned by the employee during the tax year.      \$ □□□,□□□.□□

Signature	ADD BAR CODES & FOR SSA USE ONLY	
Title	Date	Phone Number (____) _____ - _____

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## EMPLOYER INSTRUCTIONS FOR COMPLETING SPECIAL WAGE PAYMENT FORM

1. Provide the EIN that was used or will be used to report the employee's wages on the Form W-2.
2. Enter the date the employee retired. Enter "Not Retired" if the employee has not retired.
3. Enter the date that the employee last performed services; was not expected to return to work; and was not subject to recall to render additional services. This date should be the same as or earlier than the date in item "2". Enter "Not Retired" if the employee has not retired.
4. Enter the wages that were paid to the employee in the tax year that were for services that were performed in years *prior* to the tax year or that were paid on account of retirement.

### Examples (not all inclusive) of payments to be included:

- Payments in lieu of vacation that were earned in a year *prior* to the tax year.
- Accumulated sick payments which were paid in a lump sum based on "retirement" as the sole condition of payment.
- Accumulated sick payments paid at or after the date in item 3, which were earned in a year prior to the tax year.
- Payments "on account of retirement" --- dismissal, severance or termination pay paid because of retirement.
- Bonuses which are paid pursuant to a prior contract, agreement or promise causing the employee to expect such payments regularly; or announced to induce the employee to work more steadily, rapidly or efficiently or to remain with the employer.
- Stock Options.

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### Do not include in item "4", payments:

- For annual, sick, holiday or vacation pay if used (absence from work) prior to the date of retirement (earlier of items "2" or "3").
- That were reported or will be reported under "Nonqualified Plans" on the form W-2.
- That were deducted from the employee's wages and paid to a deferred compensation plan (e.g., 401k).
- Employees' health and dental plan benefits (non-covered/non-taxable for Social Security wages).
- Bonuses *earned* and *paid* in the tax year.

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5. Check whether payments listed in item 4 will be made for years after the tax year. If yes, please show the amounts and years in which these will be paid, if known.
  6. **Nonqualified deferred compensation and section 457 plans only.** If you were unable to report nonqualified deferred compensation or section 457 plan payments and deferrals (contributions) on Form W-2 because both payments and deferrals occurred during the year, show the amount of wages **earned** by the employee during the tax year. Generally, the wages earned will be the compensation reported in block 1 of Form W-2 less payment from a nonqualified deferred compensation (or 457) plan, but including any amounts deferred under the plan during the tax year (See IRS Publication 957).

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**Paperwork/Privacy Act Notice:** This report is authorized by regulation 20 CFR 404.702. The information that you provide will be used in making a determination regarding the amount of Social Security benefits payable to the above named individual. While your response is voluntary, if you do not respond we may not be able to make a correct determination regarding the amount of Social Security benefits payable to the above named individual for the year in question.

We may also use the information you give us when we match records by computer. Matching programs compare our records with those of other Federal, State, or local government agencies. Many agencies may use matching programs to find or prove that a person qualifies for benefits paid by the Federal Government. The law allows us to do this even if you do not agree to it.

Explanations about these and other reasons why information you provide us may be used or given out are available in Social Security Offices. If you want to learn more about this, contact any Social Security Office.

**PAPERWORK REDUCTION ACT:** This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 20 minutes to read the instructions, gather the facts, and answer the questions. *You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address, not the completed form.*