

Form **5754**
(Rev. Nov. 1981)

Department of the Treasury—Internal Revenue Service

OMB No. 1545-0239

Expires 9-30-84

Statement by Person(s) Receiving Gambling Winnings

Date won	Type of winnings	Game number	Machine number	Race number
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Part I Person to Whom Winnings are Paid

Name	Address

Taxpayer identifying number	Other I.D.	Amount received	Federal income tax withheld

Part II Persons to Whom Winning Payments are Taxable

Name	Taxpayer identifying number	Address	Amount won

Under penalties of perjury, I declare that to the best of my knowledge and belief the names, addresses, and taxpayer identifying numbers which I have furnished correctly identify me as the recipient of this payment and correctly identify each person entitled to any portion of this payment.

Signature ►

Date ►

For Paperwork Reduction Act Notice, see back of form.

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Part II Persons to Whom Winning Payments are Taxable (Continued)

Name	Taxpayer identifying number	Address	Amount won

Paperwork Reduction Act Notice — We ask for this information, and the amount of the winnings should also appear in Part II.