

# Statement for Recipients of Annuities, Pensions or Retired Pay

# 1973

Copy A For Internal Revenue Service Center

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

### FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay                            |                  |                    | Disability Retirees under Normal Retirement Age                                              |                                   |                |
|-------------------------------------------------------------|------------------|--------------------|----------------------------------------------------------------------------------------------|-----------------------------------|----------------|
| 1   Federal income tax withheld                             | 2   Gross amount | 3   Taxable amount | 4   Gross amount reportable as wages or salary                                               | 5   Amount excludable as sick pay |                |
| RECIPIENT'S identifying number ▶                            |                  |                    | 6   State income tax withheld                                                                | 7   State abbreviation            | 8   State code |
| Type or print RECIPIENT'S name, address and ZIP code above. |                  |                    | If this is a corrected form, put an "X" to the right of the number in the upper left corner. |                                   |                |

Form **W-2P**

★ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

# Statement for Recipients of Annuities, Pensions or Retired Pay

# 1973

Copy A For Internal Revenue Service Center

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

### FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay                            |                  |                    | Disability Retirees under Normal Retirement Age                                              |                                   |                |
|-------------------------------------------------------------|------------------|--------------------|----------------------------------------------------------------------------------------------|-----------------------------------|----------------|
| 1   Federal income tax withheld                             | 2   Gross amount | 3   Taxable amount | 4   Gross amount reportable as wages or salary                                               | 5   Amount excludable as sick pay |                |
| RECIPIENT'S identifying number ▶                            |                  |                    | 6   State income tax withheld                                                                | 7   State abbreviation            | 8   State code |
| Type or print RECIPIENT'S name, address and ZIP code above. |                  |                    | If this is a corrected form, put an "X" to the right of the number in the upper left corner. |                                   |                |

Form **W-2P**

★ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

# Statement for Recipients of Annuities, Pensions or Retired Pay

# 1973

Copy A For Internal Revenue Service Center

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

### FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay                            |                  |                    | Disability Retirees under Normal Retirement Age                                              |                                   |                |
|-------------------------------------------------------------|------------------|--------------------|----------------------------------------------------------------------------------------------|-----------------------------------|----------------|
| 1   Federal income tax withheld                             | 2   Gross amount | 3   Taxable amount | 4   Gross amount reportable as wages or salary                                               | 5   Amount excludable as sick pay |                |
| RECIPIENT'S identifying number ▶                            |                  |                    | 6   State income tax withheld                                                                | 7   State abbreviation            | 8   State code |
| Type or print RECIPIENT'S name, address and ZIP code above. |                  |                    | If this is a corrected form, put an "X" to the right of the number in the upper left corner. |                                   |                |

Form **W-2P**

★ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service



Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy 1 For State  
or City Tax Dept.

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay                            |                             |   | Disability Retirees under Normal Retirement Age |   |                |                                                          |                                            |   |                               |   |            |
|-------------------------------------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|----------------------------------------------------------|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                                           | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4                                                        | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ►                            |                             |   |                                                 |   |                | 6                                                        | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |
| <b>FOR STATE OR CITY USE ONLY</b>                           |                             |   |                                                 |   |                |                                                          |                                            |   |                               |   |            |
| Type or print RECIPIENT'S name, address and ZIP code above. |                             |   |                                                 |   |                | Employee's copy and employer's copy compared . . . . . ► |                                            |   |                               |   |            |

Form **W-2P**

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy 1 For State  
or City Tax Dept.

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay                            |                             |   | Disability Retirees under Normal Retirement Age |   |                |                                                          |                                            |   |                               |   |            |
|-------------------------------------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|----------------------------------------------------------|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                                           | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4                                                        | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ►                            |                             |   |                                                 |   |                | 6                                                        | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |
| <b>FOR STATE OR CITY USE ONLY</b>                           |                             |   |                                                 |   |                |                                                          |                                            |   |                               |   |            |
| Type or print RECIPIENT'S name, address and ZIP code above. |                             |   |                                                 |   |                | Employee's copy and employer's copy compared . . . . . ► |                                            |   |                               |   |            |

Form **W-2P**

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy 1 For State  
or City Tax Dept.

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay                            |                             |   | Disability Retirees under Normal Retirement Age |   |                |                                                          |                                            |   |                               |   |            |
|-------------------------------------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|----------------------------------------------------------|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                                           | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4                                                        | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ►                            |                             |   |                                                 |   |                | 6                                                        | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |
| <b>FOR STATE OR CITY USE ONLY</b>                           |                             |   |                                                 |   |                |                                                          |                                            |   |                               |   |            |
| Type or print RECIPIENT'S name, address and ZIP code above. |                             |   |                                                 |   |                | Employee's copy and employer's copy compared . . . . . ► |                                            |   |                               |   |            |

Form **W-2P**

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service



Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy B

PAYER'S State identifying number

File with recipient's FEDERAL  
tax return if tax was withheld

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy B

PAYER'S State identifying number

File with recipient's FEDERAL  
tax return if tax was withheld

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy B

PAYER'S State identifying number

File with recipient's FEDERAL  
tax return if tax was withheld

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service



Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy C

For Recipient's Records

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy C

For Recipient's Records

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy C

For Recipient's Records

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

☆ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service





**Statement for Recipients of  
Annuities, Pensions  
or Retired Pay**

**1973**

Copy 2  
To be Filed with  
Recipient's State or  
City Income Tax Return

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

**FEDERAL INCOME TAX INFORMATION**

|                                                             |                                  |                    |                                                        |                                   |                |  |
|-------------------------------------------------------------|----------------------------------|--------------------|--------------------------------------------------------|-----------------------------------|----------------|--|
| 1   Federal income tax withheld                             | Annuity, Pension, or Retired Pay |                    | Disability Retirees under Normal Retirement Age        |                                   |                |  |
|                                                             | 2   Gross amount                 | 3   Taxable amount | 4   Gross amount reportable as wages or salary         | 5   Amount excludable as sick pay |                |  |
| RECIPIENT'S identifying number ►                            |                                  |                    | 6   State income tax withheld                          | 7   State abbreviation            | 8   State code |  |
| <b>FOR STATE OR CITY USE ONLY</b>                           |                                  |                    |                                                        |                                   |                |  |
| Type or print RECIPIENT'S name, address and ZIP code above. |                                  |                    | Employee's copy and employer's copy compared . . . . ► |                                   |                |  |

Form **W-2P**

\* GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

**Statement for Recipients of  
Annuities, Pensions  
or Retired Pay**

**1973**

Copy 2  
To be Filed with  
Recipient's State or  
City Income Tax Return

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

**FEDERAL INCOME TAX INFORMATION**

|                                                             |                                  |                    |                                                        |                                   |                |  |
|-------------------------------------------------------------|----------------------------------|--------------------|--------------------------------------------------------|-----------------------------------|----------------|--|
| 1   Federal income tax withheld                             | Annuity, Pension, or Retired Pay |                    | Disability Retirees under Normal Retirement Age        |                                   |                |  |
|                                                             | 2   Gross amount                 | 3   Taxable amount | 4   Gross amount reportable as wages or salary         | 5   Amount excludable as sick pay |                |  |
| RECIPIENT'S identifying number ►                            |                                  |                    | 6   State income tax withheld                          | 7   State abbreviation            | 8   State code |  |
| <b>FOR STATE OR CITY USE ONLY</b>                           |                                  |                    |                                                        |                                   |                |  |
| Type or print RECIPIENT'S name, address and ZIP code above. |                                  |                    | Employee's copy and employer's copy compared . . . . ► |                                   |                |  |

Form **W-2P**

\* GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

**Statement for Recipients of  
Annuities, Pensions  
or Retired Pay**

**1973**

Copy 2  
To be Filed with  
Recipient's State or  
City Income Tax Return

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

**FEDERAL INCOME TAX INFORMATION**

|                                                             |                                  |                    |                                                        |                                   |                |  |
|-------------------------------------------------------------|----------------------------------|--------------------|--------------------------------------------------------|-----------------------------------|----------------|--|
| 1   Federal income tax withheld                             | Annuity, Pension, or Retired Pay |                    | Disability Retirees under Normal Retirement Age        |                                   |                |  |
|                                                             | 2   Gross amount                 | 3   Taxable amount | 4   Gross amount reportable as wages or salary         | 5   Amount excludable as sick pay |                |  |
| RECIPIENT'S identifying number ►                            |                                  |                    | 6   State income tax withheld                          | 7   State abbreviation            | 8   State code |  |
| <b>FOR STATE OR CITY USE ONLY</b>                           |                                  |                    |                                                        |                                   |                |  |
| Type or print RECIPIENT'S name, address and ZIP code above. |                                  |                    | Employee's copy and employer's copy compared . . . . ► |                                   |                |  |

Form **W-2P**

\* GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service



Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy D  
For payer

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

★ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy D  
For payer

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

★ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service

Statement for Recipients of  
Annuities, Pensions  
or Retired Pay

1973

Copy D  
For payer

PAYER'S State identifying number

Type or print PAYER'S Federal identifying number, name, address and ZIP code above.

FEDERAL INCOME TAX INFORMATION

| Annuity, Pension, or Retired Pay |                             |   | Disability Retirees under Normal Retirement Age |   |                |   |                                            |   |                               |   |            |
|----------------------------------|-----------------------------|---|-------------------------------------------------|---|----------------|---|--------------------------------------------|---|-------------------------------|---|------------|
| 1                                | Federal income tax withheld | 2 | Gross amount                                    | 3 | Taxable amount | 4 | Gross amount reportable as wages or salary | 5 | Amount excludable as sick pay |   |            |
| RECIPIENT'S identifying number ► |                             |   |                                                 |   |                | 6 | State income tax withheld                  | 7 | State abbreviation            | 8 | State code |

This information is being furnished by the Internal Revenue Service to appropriate State officials.

An "X" in the upper left corner indicates this is a corrected form.

Type or print RECIPIENT'S name, address and ZIP code above.

Form W-2P

★ GPO: 1972-458-024 7E136-2515832-8

Department of the Treasury—Internal Revenue Service