

3232

 CORRECTED

OMB No. 1545-0238

1993**Certain
Gambling
Winnings**

For Paperwork
Reduction Act Notice
and instructions for
completing this form,
see **Instructions for
Forms 1099, 1098,
5498, and W-2G.**

File with Form 1096.**Copy A
For Internal Revenue
Service Center**

PAYER'S name Street address City, state, and ZIP code Federal identification number	1 Gross winnings	2 Federal income tax withheld
	3 Type of wager	4 Date won : : : :
	5 Transaction	6 Race
	7 Winnings from identical wagers	8 Cashier
WINNER'S name Street address (including apt. no.) City, state, and ZIP code	9 Winner's taxpayer identification no.	10 Window
	11 First I.D.	12 Second I.D.
	13 State/Payer's state identification no.	14 State income tax withheld
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 ▶

Form **W-2G**

Cat. No. 10138V

Department of the Treasury - Internal Revenue Service