1350

STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

SUBSTITUTE FOR FORM W2 WAGE AND TAX STATEMENT

SC4852 (Rev. 7/15/19) 3236

dor.sc.gov

File this form with your South Carolina Income Tax Return.

Complete a separate form for each employer.

Your full name (type or print)					Social Security Number		
Address	City			State 2	ZIP		
Your phone number		Does this employer have your current address?		Period worked for this employer			
Employer's name		•					
Employer's address	City			State ZIP			
Employer's Federal Identifica	tion Number (i	f known)					
Employer's phone number	Type of t	Γype of business					
Wages paid in: ☐ cash ☐ check	Amount of wages		Estimated South Carolina Incom		ne Taxes withheld	Tax year	
Which form you are referenci	ng?			Check appli			
1. W2 🔲	3. W2C			 Employer has not given me the forms. Forms given to me by employer are incorrect. 			
2. W2P 🔲	4. 1099		3. ☐ Forms are lost.4. ☐ Forms given to me by employer		•		
Attach copies of pay stu	bs, military	leave and	l earnings staten	ent, or othe	er documentation	to support your claim.	
		REC	QUIRED INFO	RMATION			
Explain how you calculated th	ne amount of v	vages rece	ived and the amour	t of estimated	South Carolina Incor	ne Taxes withheld.	
Explain the efforts you made	to get an accu	rate W2, V	V2P, W2C, 1099.				
I declare that this return and a false or fraudulent statement				te to the best	of my knowledge and	d belief. To willfully furnish	
Signature					[Date	

Social Security Privacy Act Disclosure

It is mandatory that you provide your Social Security Number on this tax form if you are an individual taxpayer. 42 U.S.C. 405(c)(2)(C)(i) permits a state to use an individual's Social Security Number as means of identification in administration of any tax. SC Regulation 117-201 mandates that any person required to make a return to the SCDOR must provide identifying numbers, as prescribed, for securing proper identification. Your Social Security Number is used for identification purposes.