☐ CORRECTED (if checked)

PAYER'S name			1 Reportable winnings	2 Date won
John Doe			$	7/1/26
Street address	Room or suite no.		3 Type of wager	4 Federal income tax withheld
123 s 2nd st			Daily Double	$
City or town			5 Transaction	6 Race
Miami				
State or province	Country	ZIP or foreign postal code	7 Winnings from identical wagers	8 Cashier
FL	US	33139	$	
PAYER'S TIN	PAYER'S telephone no.		9 WINNER'S TIN	10 Window
12-3456789	(123)-456-7899			
WINNER'S name			11 First identification no.	12 Second identification no.
James Smith				
Street address		Apt. no.	13 State/Payer's state identification no.	14 State winnings
456 w 3rd St				$
City or town			15 State income tax withheld	16 Local winnings
Beverly Hills				
State or province	Country	ZIP or foreign postal code	$	$
CA	US	90210		
			17 Local income tax withheld	18 Name of locality
			$	

OMB No. 1545-0238

Form W-2G

Certain Gambling Winnings

(Rev. January 2026)

For calendar year 20 26

This information is being furnished to the IRS.

Copy B

Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.

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:**