

W2G/1042S Tax Summary Request

Please fill out this request form completely and sign. Print clearly using blue or black ink so we can process your request. Please allow up to two weeks to process this request once received. You may mail or fax your completed form. For privacy purposes, the requested Tax Summary will be mailed to the address on the file that you provided for your MGM Rewards account. Please note that we do require a signed form for all requests.

Mail:	Finan MGM 880 Gi	GAA - Accounting & Tax Finance Shared Services Center MGM Resorts International 880 Grier Dr. Las Vegas, NV 89119			Fax: 702-669-6121		
Tax Ty	pes:	□ W2G	□ 104	28			
Tax Ye	ar Requ	ested:					
Today's	Date: _	//	//				
Guest N	lame:	First Name	<u></u>	Last N	ame		
			/				
MGM F	Rewards	Number:					
Tax Ide	ntificatio	on Number or Soc	cial Security Num	ber (last four digits	only):		
Contact	Phone N	Number: ()				
Property	y Reques	sted:					
🗆 Aria		□ Bellagio	□ Excalibur	□ Luxor	Mandalay Bay	□ MGM Grand Las Vegas	
□ Park	MGM	□ New York-N	lew York	🗆 Beau Rivage	□ Gold Strike Tunica	□ MGM Detroit	
□ MGM National Harbor □ MGM			□ MGM North	field Park	□ MGM Springfield		

I do hereby certify that the information contained herein is true and correct, and I hereby authorize MGM Resorts International, its Subsidiaries, Affiliates and Agents, to provide my tax summary (W2G or 1042S) for the requested year to me. In consideration for this, I agree to indemnify and hold harmless MGM Resorts International and its past and present agents, directors, employees, managers, representatives, officers, successors, affiliated persons, organizations, and companies from any and all claims, causes of action, liabilities, costs, or damages arising from or relating to the information and its release as a result of this request.

Customer Signature:

Below for GAA Tax Use Only

 Date Received:
 /____/
 Completed By:

Date Completed: ____/___/