55555	a Employee's social security number	OMB No. 1545-0008				
b Employer identification number (EIN)			1 Wages, tips, other compensation			
c Employer's name, address, and ZIP code			3 Social security wages			
			5 Medicare wages and tips			
			7 Soc	cial security tips	8 Allow	
d Control number			9		10 Dependent care benefits	
e Employee's first name and initial Last name Suff.			11 Nor	1 Nonqualified plans		
			13 Statutory Retirement Third-party sick pay		12b	
			14 Other		12c	
					12d	
f Employee's address and ZIP code						
15 State Employer's state ID numb	per 16 State wages, tips, etc.	17 State incon	ne tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement
Copy 1—For State, City, or Local Tax Department



Department of the Treasury-Internal Revenue Service