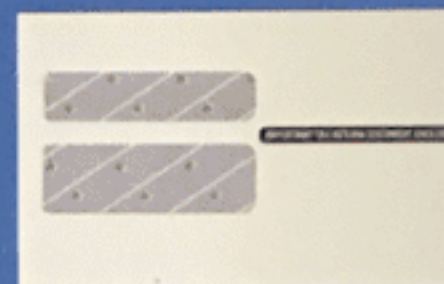


22222	VOID <input type="checkbox"/>	a Employee's social security number	For Official Use Only OMB No. 1545-0008	
b Employer identification number (EIN)		1 Wages, tips, other compensation	2 Federal income tax withheld	
c Employer's name, address, and ZIP code		3 Social security wages	4 Social security tax withheld	
		5 Medicare wages and tips	6 Medicare tax withheld	

TXSC620

MEETS IRS
SPECIFICATIONS

W-2 TAX KIT

FOR **40** EMPLOYEES**40**6-Part Sets on
20 Perfed Sheets**40**Peel & Seal
Security Envelopes**6**W-3 Summary
Forms

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f Employee's address and ZIP code		14 Other		12c	
				12d	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
					20 Locality name

Form **W-2** Wage and Tax Statement

37-1804157

2020

Department of the Treasury—Internal Revenue Service

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Act Notice, see the separate instructions.Copy A – For Social Security Administration. Send this entire page with
Form W-3 to the Social Security Administration; photocopies are **not** acceptable.