	a Employee's social security number	OMB No. 1545-0008	are required to file a tax return	ished to the Internal Revenue Ser n, a negligence penalty or other s s income is taxable and you fail to	anction
b Employer identification number (EIN)			Wages, tips, other compensation Federal income tax withheld		hheld
c Employer's name, address, and ZIP code			Social security wages	4 Social security tax withheld	
		5 1	Medicare wages and tips	6 Medicare tax withheld	
		7 5	Social security tips	8 Allocated tips	
d Control number				10 Dependent care benefits	
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 12a See instructions for box 1		ox 12
		13 8	tatutory Retirement Third-party sick pay	12b	
			ther	12c	
				12d	
f Employee's address and ZIP co	de				
15 State Employer's state ID num	ber 16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax 20	Locality name

-orm W=2 Wage and Tax Statement

Tax Year

Department of the Treasury-Internal Revenue Service

Copy C-For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)