

Copy B To Be Filed With Employee's Federal Tax Return		2012		OMB No. 1545-0008
a Employee's social security number	1 Wages, tips, other compensation	2 Federal income tax withheld		
043-94-1001	106800.00	21360.00		
b Employer ID no. (EIN)	3 Social security wages	4 Social security tax withheld		
12-222222	106800.00	6621.60		
	5 Medicare wages and tips	6 Medicare tax withheld		
	106800.00	1548.60		
c Employer's name, address, and ZIP code				
State Testing - Custom Testing 24969 Mulholland Highway Calabasas, CA 91302				
d Control number				
1001				
e/f Employee's name, address, and ZIP code				
Miriam Chancon Name Line 2 Apt 662 8923 Anchorage Way Anchorage, AK 99503				
7 Social security tips		8 Allocated tips		9
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12
13 Statutory employee	14 Other		12b Code	
Retirement plan			12c Code	
Third-party sick pay			12d Code	
AK	a	106800.00	10680.00	
15 State Employer's state ID no.		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
This information is being furnished to the Internal Revenue Service.

Department of the Treasury - IRS

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return		2012		OMB No. 1545-0008
a Employee's social security number	1 Wages, tips, other compensation	2 Federal income tax withheld		
043-94-1001	106800.00	21360.00		
b Employer ID no. (EIN)	3 Social security wages	4 Social security tax withheld		
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7 Social security tips		8 Allocated tips		9
10 Dependent care benefits		11 Nonqualified plans		12a Code
13 Statutory employee	14 Other		12b Code	
Retirement plan			12c Code	
Third-party sick pay			12d Code	
AK	a	106800.00	10680.00	
15 State Employer's state ID no.		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
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Department of the Treasury - IRS

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)		2012		OMB No. 1545-0008
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b Employer ID no. (EIN)	3 Social security wages	4 Social security tax withheld		
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	5 Medicare wages and tips	6 Medicare tax withheld		
	106800.00	1548.60		
c Employer's name, address, and ZIP code				
State Testing - Custom Testing 24969 Mulholland Highway Calabasas, CA 91302				
d Control number				
1001				
e/f Employee's name, address, and ZIP code				
Miriam Chancon Name Line 2 Apt 662 8923 Anchorage Way Anchorage, AK 99503				
7 Social security tips		8 Allocated tips		9
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12
13 Statutory employee	14 Other		12b Code	
Retirement plan			12c Code	
Third-party sick pay			12d Code	
AK	a	106800.00	10680.00	
15 State Employer's state ID no.		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
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Department of the Treasury - IRS

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Miriam Chancon Name Line 2 Apt 662 8923 Anchorage Way Anchorage, AK 99503				
7 Social security tips		8 Allocated tips		9
10 Dependent care benefits		11 Nonqualified plans		12a Code
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18 Local wages, tips, etc.		19 Local income tax		20 Locality name

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