

22222

Void

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			
		7 Social security tips		8 Allocated tips			
d Control number		9		10 Dependent care benefits			
e Employee's first name and initial	Last name	Suff.	11 Nonqualified plans		12a See instructions for box 12 c o d e		
f Employee's address and ZIP code		13 <input type="checkbox"/> Statutory employee	<input type="checkbox"/> Retirement plan	<input type="checkbox"/> Third-party sick pay	12b c o d e		
		14 Other			12c c o d e		
					12d c o d e		
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

W-2 Wage and Tax Statement

Form

Copy A For Social Security Administration — Send this entire page with
Form W-3 to the Social Security Administration; photocopies are **not** acceptable.

2015

Department of the Treasury—Internal Revenue Service

For Privacy Act and Paperwork Reduction
Act Notice, see the separate instructions.

Cat. No. 10134D

Do Not Cut, Fold, or Staple Forms on This Page