55555	Void	a Employe	e's social security number		or Official Use Only ▶ 0MB 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 Me	5 Medicare wages and tips			6 Medicare tax withheld		
						7 Soc	Social security tips			8 Allocated tips		
d Control number						9		10 Dependent care benefits				
e Employee's first name and initial Last name			name		Suff.	11 Nonqualified plans			12a See instructions for box 12			
						13 Statu	utory Retirement loyee plan	Third-party sick pay	12b			
						14 Other			12c			
									12d			
f Employee's address and ZIP code												
15 State Employe	Employer's state ID number 16 State wages, tips, etc. 17		17 State incom		ne tax 18 Local wage		s, tips, etc.	19 Local income tax		20 Locality name		
Department of the Treasury—Internal Revenue Service												

Form W-2 Wage and Tax Statement

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15 State Employe	State Employer's state ID number 16 State wages, tips, etc. 17 State in				e incom	e tax	18 Local wages, t	8 Local wages, tips, etc.		ome tax	20 Locality name

W_2 Wage and Tax Statement

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