a Employee's	s social security number	OMB No. 1545	5-0008	Safe, accurate, FAST! Use	IRS	file		IRS website at .gov/efile		
<b>b</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				
			<b>5</b> Me	dicare wages and	tips	6 Medic	are tax with	held		
			<b>7</b> Soc	cial security tips		8 Alloca	ited tips			
d Control number			9			10 Deper	ndent care b	penefits		
e Employee's first name and initial Last name Suff.			11 Nonqualified plans			12a See instructions for box 12				
			13 State	utory Retirement loyee plan	Third-party sick pay	12b				
			<b>14</b> Oth	er		12c				
						<b>12d</b>				
f Employee's address and ZIP code										
15 State Employer's state ID number	16 State wages, tips, etc.	17 State incom	ne tax	18 Local wages	, tips, etc.	19 Local inc	ome tax	20 Locality name		
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Copy B—To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

	a Employee's social security number	OMB No. 1545		Safe, accurate, FAST! Use	Visit the IRS website at www.irs.gov/efile		
<b>b</b> Employer identification number (l	EIN)		1 Wag	es, tips, other compensation	2 Federal income tax withheld		
c Employer's name, address, and ZIP code			<b>3</b> Soc	ial security wages	4 Social security tax withheld		
			5 Med	dicare wages and tips	6 Medicare tax withheld		
			<b>7</b> Soc	ial security tips	8 Allocated tips		
d Control number			9		10 Dependent care benefits		
e Employee's first name and initial Last name Suff.				nqualified plans	12a See instructions for box 12		
			13 Statu empl		12b		
			<b>14</b> Othe	er	12c		
					12d		
f Employee's address and ZIP code	e						
15 State Employer's state ID num	ber 16 State wages, tips, etc.	17 State incom	e tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name		

Wage and Tax Statement

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