

22222		VOID <input type="checkbox"/>		a Employee's social security number 333-12-3212		For Official Use Only OMB No. 1545-0008					
b Employer identification number (EIN) 20-1231234					1 Wages, tips, other compensation 50,000.00			2 Federal income tax withheld 5,278.00			
c Employer's name, address, and ZIP code Broke Inc. 3452 Buffington St Atlanta, GA 30123					3 Social security wages 50,000.00			4 Social security tax withheld 3,100.00			
					5 Medicare wages and tips 50,000.00			6 Medicare tax withheld 725.00			
					7 Social security tips			8 Allocated tips			
d Control number					9			10 Dependent care benefits			
e Employee's first name and initial Donald		Last name Trump		Suff.		11 Nonqualified plans			12a See instructions for box 12 C o d e		
3211 21st St Atlanta, GA 30001					13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>			12b C o d e			
					14 Other			12c C o d e			
								12d C o d e			
f Employee's address and ZIP code											
15 State GA	Employer's state ID number 12-3222111		16 State wages, tips, etc. 50,000.00	17 State income tax 1,275.00	18 Local wages, tips, etc.		19 Local income tax		20 Locality name Atlanta		

Form **W-2** Wage and Tax Statement

2023

Department of the Treasury — Internal Revenue Service
For Privacy Act and Paperwork Reduction
Act Notice, see the separate instructions.

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

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