222	22	VOID	a Em	ployee's social security number	For Official Use Only ► OMB No. 1545-0008							
<b>b</b> Employer identification number (EIN)							<b>1</b> Wa	ges, tips, other compensation	2 Federal income tax withheld			
c Employer's name, address, and ZIP code							<b>3</b> So	cial security wages	4 Social security tax withheld			
							5 Medicare wages and tips		6 Medicare tax withheld			
							<b>7</b> So	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.						Suff.	<b>11</b> No	11 Nonqualified plans			for box 12	
							13 Sta	tutory Retirement Third-party ployee plan sick pay	<b>12b</b>			
							14 Other		12c			
									<b>12d</b>			
f Employee's address and ZIP code												
15 State Employer's state ID number			16 State wages, tips, etc.	etc. 17 State income			e tax 18 Local wages, tips, etc.		19 Local income tax			
Department of the Traceum, Internal Reviews Coming												

Form W-2 Wage and Tax Statement



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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