22222	a Employee's social security number	OMB No. 1	545-0008			
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld \$40000	
			\$500	00		
c Employer's name, address, and ZIP code			3 Social security wages \$25000		4 Social security tax withheld 70000	
			5 Me \$300	edicare wages and tips 100	6 Medicare tax wit 65000	hheld
			7 So	cial security tips	8 Allocated tips	
d Control number					10 Dependent care benefits	
e Employee's first name and initial Last name Suff. f Employee's address and ZIP code				onqualified plans	12a	
				tutory nployee ^R etirement planThird-party sick pay	12b ^{Cod} e	
				her	12c	
					12d	
15 State Employer's state ID num	State Employer's state ID number 16 State wages, tips, etc. 17 State inc		ome tax 18 Local wages, tips, etc.		19 Local income tax	20 Locality name