

Form W-2 Wage and Tax Statement 2024

a. Employee's SSN: XXX-XX-0123

b. Employer ID (EIN):
56-7890123

c. Employer name, address:
Mountain View Medical Center
1500 Hospital Dr, Arvada, CO 80002

1. Wages, tips, other comp.

\$88000.00

2. Federal income tax withheld

\$19360.00

3. Social security wages

\$88000.00

4. Social security tax withheld

\$5456.00

5. Medicare wages and tips

\$88000.00

6. Medicare tax withheld

\$1276.00

e. Employee name and address:

Patricia Nelson
123 Test Address St
Denver, CO 80202