

Form W-2 Wage and Tax Statement 2024

a. Employee's SSN: XXX-XX-8902

b. Employer ID (EIN):
34-5678902

c. Employer name, address:

Regional Healthcare
2000 Medical Plaza, Aurora, CO 80015

1. Wages, tips, other comp.

\$92000.00

2. Federal income tax withheld

\$20240.00

3. Social security wages

\$92000.00

4. Social security tax withheld

\$5704.00

5. Medicare wages and tips

\$92000.00

6. Medicare tax withheld

\$1334.00

e. Employee name and address:

Amanda Wilson
123 Test Address St
Denver, CO 80202