

22222		<input type="checkbox"/> VOID		a Employee's social security number 123-45-6789		For Official Use Only OMB No. 1545-0008			
b Employer identification number (EIN) 12-1234567		1 Wages, tips, other compensation 50,000.00						2 Federal income tax withheld 4,092.00	
c Employer's name, address, and ZIP code Company ABC 444 Example Road Columbus, OH 43218		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 Abby L		Last name Smith		Suff.		11 Nonqualified plans		12a See instructions for box 12	
123 Sample Road Columbus, OH 43218		f Employee's address and ZIP code		13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		12b	
				Third-party sick pay <input type="checkbox"/>					
				14 Other		12c			
15 State Employer's state ID number OH 12-3456789		16 State wages, tips, etc. 50,000.00		17 State income tax 1,040.88		18 Local wages, tips, etc. 50,000.00		19 Local income tax 1,250.00	
								20 Locality name Columbus	