	a Employee's social security number	1		21	V IDO 1
	a Employee's social security number	OMB No. 154	5-0008	Safe, accurate, FAST! Use	Visit the IRS website at www.irs.gov/efile.
b Employer identification number (EIN)			1 Wag	ges, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code			3 Soc	cial security wages	4 Social security tax withheld
			5 Me	dicare wages and tips	6 Medicare tax withheld
			7 Soc	cial security tips	8 Allocated tips
d Control number			9		10 Dependent care benefits
e Employee's first name and initial Last name Suff.				1 Nonqualified plans 12a See instructions for box 12	
			13 State emp	utory Retirement Third-party sloyee plan sick pay	12b
			14 Other		12c
					12d
f Employee's address and ZIP code					
15 State Employer's state ID numb	eer 16 State wages, tips, etc.	17 State incom	ne tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name
					

Form **W-2** Wage and Tax Statement



Department of the Treasury-Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.