

		a Employee's social security number 123-45-6789		OMB No. 1545-0008		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.	
b Employer identification number (EIN) 98-7654321				1 Wages, tips, other compensation 70,000.00		2 Federal income tax withheld 10,000.00	
c Employer's name, address, and ZIP code Some Company, 11 Main Street, Boston, MA, 02111				3 Social security wages 80,000.00		4 Social security tax withheld 11,000.00	
				5 Medicare wages and tips 90,000.00		6 Medicare tax withheld 12,000.00	
				7 Social security tips 100,000.00		8 Allocated tips	
d Control number				9		10 Dependent care benefits 5,000	
e Employee's first name and initial John		Last name Doe		Suff.		11 Nonqualified plans	
41 Oak Road, Boston, MA, 02110				13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a See instructions for box 12 C o d e DD 7,000	
						12b C o d e DD 6,000	
						12c C o d e	
f Employee's address and ZIP code				14 Other		12d C o d e	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
MA	2468	70,000	6,000				

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

2023

Copy C—For EMPLOYEE'S RECORDS
(See Notice to Employee on the back of Copy B.)

Department of the Treasury—Internal Revenue Service

Safe, accurate,
FAST! Use



		a Employee's social security number 987-65-4321		OMB No. 1545-0008	
b Employer identification number (EIN) 76-5432109			1 Wages, tips, other compensation 99,000		2 Federal income tax withheld 10,000
c Employer's name, address, and ZIP code ACME CORP 99 WATER ST, BOSTON MA 02111			3 Social security wages 99,000		4 Social security tax withheld 10,000
			5 Medicare wages and tips 99,000		6 Medicare tax withheld 10,000
			7 Social security tips		8 Allocated tips
d Control number			9		10 Dependent care benefits
e Employee's first name and initial Jane A		Last name Doe	Suff.	11 Nonqualified plans	
No 9 Redfield Street, Boston, Ma, 02111				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
				14 Other	
f Employee's address and ZIP code					
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
20 Locality name					