ANNUAL WAGE AND TAX STATEMENT

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A EMPLOYEE'S SOCIAL SECURITY NUMBER / TAXPAYER ID

1 WAGES, TIPS, OTHER COMPENSATION

2 INCOME TAX WITHHELD

B EMPLOYER IDENTIFICATION NUMBER (EIN)

3 SOCIAL SECURITY WAGES

4 SOCIAL SECURITY TAX WITHHELD

C EMPLOYER'S NAME, ADDRESS, AND ZIP CODE

5 MEDICARE WAGES AND TIPS

6 MEDICARE TAX WITHHELD

7 SOCIAL SECURITY TIPS

8 ALLOCATED TIPS

D CONTROL NUMBER

9 VERIFICATION CODE

10 DEPENDENT CARE BENEFITS

E EMPLOYEE'S FIRST NAME AND INITIAL

11 NONQUALIFIED PLANS

12A SEE INSTRUCTIONS FOR BOX 12

EMPLOYEE'S LAST NAME

12B

F EMPLOYEE'S ADDRESS AND ZIP CODE

13 CHECKBOXES

☐ Statutory ☐ Retirement ☐ Third-party

12C

14 OTHER

12D	
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	