

ANNUAL TAXABLE WAGES STATEMENT

Tax Year:

EMPLOYER INFORMATION

Employer Name:

EIN / Tax ID:

Address:

City, State, ZIP:

EMPLOYEE INFORMATION

Employee Name:

SSN / ITIN:

Address:

City, State, ZIP:

TAXABLE EARNINGS & WITHHOLDING SUMMARY

Description	Amount (\$)
Gross Wages, Tips, and Other Compensation	
Pre-Tax Deductions (Health, Retirement, etc.)	
Total Federal Taxable Wages	
Federal Income Tax Withheld	
Social Security Wages (up to wage base limit)	
Social Security Tax Withheld	
Medicare Wages and Tips	
Medicare Tax Withheld	
State Taxable Wages	
State Income Tax Withheld	
Local Taxable Wages	
Local Income Tax Withheld	

Authorized Employer Signature

Date:

Employee Signature (Acknowledgment)

Date:
