

22222	a Employee's social security number		OMB No. 1545-0008				
b Employer identification number (EIN) -			1 Wages, tips, other compensation			2 Federal income tax withheld	
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld 0.00	
			5 Medicare wages and tips			6 Medicare tax withheld 0	
			7 Social security tips			8 Allocated tips	
d Control number 9						10 Dependent care benefits	
e Employee's first name and initial		Last name stuff.	11 Nonqualified plans			12a	
f Employee's address and ZIP code			13 Statutory employee <input type="checkbox"/>			12b	
			Retirement plan <input type="checkbox"/>			12c	
			Third-party sick pay <input type="checkbox"/>			12d	
			14 Other				
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	

Form **W-2** Wage and Tax Statement
Copy 1—For State, City, or Local Tax Department

2025

Department of the Treasury — Internal Revenue Service