

		a Employee's social security number 822-00-6547		OMB No. 1545-0008		
b Employer identification number (EIN) 39-5123456			1 Wages, tips, other compensation 10000		2 Federal income tax withheld 1000	
c Employer's name, address, and ZIP code JOESS RESTAURANT 1200 MAIDEN LANE MACOMB IL 61455			3 Social security wages 10000		4 Social security tax withheld 620	
			5 Medicare wages and tips 10000		6 Medicare tax withheld 145	
			7 Social security tips 3000		8 Allocated tips	
d Control number			9		10 Dependent care benefits	
e Employee's first name and initial Last name Suff. LESHAUN HANSON 4725 MALLARD DRIVE GRANTS PASS OR 97527			11 Nonqualified plans		12a C o o l l e c t e d	
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o o l l e c t e d	
			14 Other		12c C o o l l e c t e d	
					12d C o o l l e c t e d	
f Employee's address and ZIP code						
15 State Employer's state ID number OR 951268		16 State wages, tips, etc. 10000	17 State income tax 459	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement **2025** Department of the Treasury—Internal Revenue Service

		a Employee's social security number 822-00-6547		OMB No. 1545-0008		
b Employer identification number (EIN) 47-6123456			1 Wages, tips, other compensation 15000		2 Federal income tax withheld 1500	
c Employer's name, address, and ZIP code EDS UPHOLSTERY 18 COUNTY RD TUCSON AZ 85749			3 Social security wages 15000		4 Social security tax withheld 930	
			5 Medicare wages and tips 15000		6 Medicare tax withheld 218	
			7 Social security tips		8 Allocated tips	
d Control number			9		10 Dependent care benefits	
e Employee's first name and initial Last name Suff. LESHAUN HANSON 4725 MALLARD DRIVE GRANTS PASS OR 97527			11 Nonqualified plans		12a C o o l l e c t e d	
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o o l l e c t e d	
			14 Other		12c C o o l l e c t e d	
					12d C o o l l e c t e d	
f Employee's address and ZIP code						
15 State Employer's state ID number OR 78945		16 State wages, tips, etc. 15000	17 State income tax 546	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement **2025** Department of the Treasury—Internal Revenue Service