

EMPLOYER NAME		ACCOUNTANT'S NAME				ACCOUNT #	
<b>W-2 EMPLOYEE DATA</b>							
EMPLOYER NAME		STATE CODE 1	LOCALITY 1	STATE CODE 2	LOCALITY 2		
		WAGES		WITHHOLDING		OTHER	
EMPLOYEE SS #	1	GROSS		2	FEDERAL	7	FICA TIPS
	3	SS		4	SS	8	ALLOC TIPS
FIRST NAME	5	Medicare		6	MEDICARE	9	ADV EIC
	16	State 1		17	STATE 1	10	Dependent care
LAST NAME	18	Local 1		19	LOCAL 1	11	NON QUAL S457
	16	State 2		17	STATE 2	11	NON QUAL
STREET ADDRESS, APT #	18	Local 2		19	LOCAL 2		
		BOX 12 (See codes to the right)			BOX 14		
CITY	STATE	ZIP	AMOUNT	CODE	AMOUNT	DESCRIPTION	
			1		1		
TYPE OF EMPLOYEE (REGULAR - AUTOMATIC)	2				2		
	3				3		
REPORTING CODE (OPTIONAL)	4						
CONTROL #							

A-Uncollected SS or RRTA tax on tips  
 B-Uncollected Medicare tax tips  
 C-Cost of group-term life insurance over 50K  
 D-Section 401(k) contribution  
 E-Section 403(b) contribution  
 F-Section 408(k)(6) contribution  
 G-Section 457 contribution  
 H-Section 501(c)(18)(d) contribution  
 J-Non taxable sick pay  
 K-Tax on excess golden parachute payments  
 L-Non taxable part of employee business expenses  
 M-Uncollected SS tax on group life ins. > 50K  
 N-Uncollected Medicare tax on group life ins.>50K  
 P-Excludible moving expense reimb. Pd. empl.  
 R-Employer contribution to MSA  
 S-Employer salary reduction contrib S408(p)  
 T-Adoption benefits  
 V-Income from exercise of nonstat stock option  
 W-Employer contribution to Health Savings Acc  
 Y-Deferrals under sec 409a nonqual def comp plan  
 Z-Income under sec 409(a)  
 AA-Designated roth contrib to sec 401(k) plan  
 AA-Designated roth contrib to sec 403(b) plan

TYPE OF EMPLOYEE:    REGULAR     STATUTORY EMPLOYEE     RETIREMENT PLAN     THIRD PARTY SICK PAY      
 AGRICULTURE  
 HOUSEHOLD  
 MILITARY  
 MEDICARE QUAL  
 RAILROAD  
 HOUSEHOLD 944

EMPLOYER NAME		STATE CODE 1		LOCALITY 1	STATE CODE 2		LOCALITY 2
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