

DETACH BEFORE MAILING
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a Employee's soc. sec. no.		b Employer identification number (EIN)		Copy 1/D Employer's-State, Local or File Copy			22222		OMB No. 1545-0008		
c Employer's name, address, and ZIP code				1 Wages, tips, other compensation			2 Federal income tax withheld				
				3 Social security wages			4 Social security tax withheld				
				5 Medicare wages and tips			6 Medicare tax withheld				
7 Social security tips			8 Allocated tips			9					
d Control number				10 Dependent care benefits			11 Nonqualified plans		12a Code See inst. for box 12		
e Employee's name, address, and ZIP code Suff.				12b Code			12c Code		12d Code		
				13 Statutory employee Retirement plan Third-party sick pay			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 2022 **For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.** Department of the Treasury - Internal Revenue Service
This information is being furnished to the Internal Revenue Service.

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