

Sample Form W2

22222	a Employee's social security number 123-45-6789	OMB No. 1545-0008			
b Employer identification number (EIN) 38-1234567		1 Wages, tips, other compensation 3000.00	2 Federal income tax withheld		
c Employer's name, address, and ZIP code Anytown Church of God 123 Praise The Lord Street Cleveland, TN 37320		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		
d Control number		9 Advance EIC payment	10 Dependent care benefits		
e Employee's first name and initial Last name Suff. Phil B. Pulpit 456 Board Street Cleveland, TN 37320		11 Nonqualified plans	12a <small>s a o c</small> E 6000.00		
		13 <small>s a o c</small> Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b <small>s a o c</small>		
		14 <small>s a o c</small> Other	12c <small>s a o c</small>		
		12000.00 Minister's Housing Allowance	12d <small>s a o c</small>		
f Employee's address and ZIP code					
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
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Form **W-2** Wage and Tax Statement
 Copy 1—For State, City, or Local Tax Department

2007