	a Employee's social security number	OMB No. 1545-0008	**Safe, accurate, FAST! Use** *IRS e-file*	Visit the IRS website at *www.irs.gov/efile*

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
	5 Medicare wages and tips	**6** Medicare tax withheld
	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.	**11** Nonqualified plans	**12a** See instructions for box 12 Code
	13 Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	**12b** Code
	14 Other	**12c** Code
		12d Code
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

Box 12

Code	Amount	Year

Box 14

Description	Amount