

22222		Void ☐		a Employee's social security number [REDACTED]		For Official Use Only [REDACTED]	
b Employer identification number (EIN) [REDACTED]				1 Wages, tips, other compensation 15600.00		2 Federal income tax withheld 936.00	
c Employer's name, address, and ZIP code [REDACTED] [REDACTED] [REDACTED]				3 Social security wages 15600.00		4 Social security tax withheld 967.20	
				5 Medicare wages and tips 15600.00		6 Medicare tax withheld 226.20	
				7 Social security tips		8 Allocated tips	
d Control number				9		10 Dependent care benefits	
e Employee's first name and initial [REDACTED]		Last name [REDACTED]		Suff		11 Nonqualified plans	
[REDACTED] [REDACTED] [REDACTED]				13 Statutory employee Retirement plan Third-party sick pay		12a See instructions for box 12	
				14 Other		12b	
				NJ-SDI 35.88		12c	
				NJ-SUI 59.67		12d	
				NJ-WFD 6.55			
f Employee's address and ZIP code				NJ-FLI 39.60			
15 State Employer's state ID number [REDACTED]		16 State wages, tips, etc. 15600.00		17 State income tax 234.00		18 Local wages, tips, etc.	
						19 Local income tax	
						20 Locality name	

Form **W-2** Wage and Tax Statement

Copy A For Social Security Administration - Send this entire page with Form W-3 to the Social Security Administration; photocopies are not acceptable.

2025
[REDACTED]

Department of the Treasury - Internal Revenue Service
For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.
Black-and-White Form W-2 (Revised 08/25)