

Copy B To Be Filed With Employee's Federal Tax Return		2016		OMB No. 1545-0008
a Employee soc. sec. no. 102-11-0029	1 Wages, tips, other comp. 327500.00	2 Federal income tax withheld 98250.00		
b Employer ID no. (EIN) 13-3249958	3 Social security wages 81000.00	4 Social security tax withheld 7347.00		
	5 Medicare wages and tips 342500.00	6 Medicare tax withheld 6248.75		
c Employer's name, address, and ZIP code INTEGRATED DATA MANAGEMENT SYSTEMS INC ACCOUNT ABILITY COMPLIANCE SOFTWARE 555 BROADHOLLOW ROAD SUITE 273 MELVILLE NY 11747-5001				
d Control number D943882128				
e Employee's name, address, and ZIP code JOHN M DOE JR 33 EAST 17 STREET # 2101 NEW YORK NY 10003-2005				
7 Social security tips 37500.00	8 Allocated tips 32000.00			
10 Dependent care benefits 8750.00	11 Nonqualified plans	12a Code S	See instr. for box 12 15000.00	
13 Statutory employee	14 Other AUTO 12500.00	12b Code V	48500.00	
Retirement plan X	NYSD 31.20	12c Code DD	8240.00	
Third-party sick pay		12d Code		
NY 133249958	300500.00	62500.00		
NJ 133249938001	27500.00	1250.00		
15 State Employer's State ID #	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc. 300500.00	19 Local income tax 18525.00	20 Locality name NYC		

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

This information is being furnished to the Internal Revenue Service

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return		2016		OMB No. 1545-0008
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Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)		2016		OMB No. 1545-0008
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