

22222		Void <input type="checkbox"/>	a Employee's social security number 102-11-0029	For Official Use Only ► OMB No. 1545-0008		
b Employer identification number 13-3249958			1 Wages, tips, other compensation 385000.00		2 Federal income tax withheld 102255.00	
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			3 Social security wages 89700.00		4 Social security tax withheld 7886.40	
			5 Medicare wages and tips 400000.00		6 Medicare tax withheld 7600.00	
			7 Social security tips 37500.00		8 Allocated tips 32000.00	
d Control number D645645646			9 Verification code		10 Dependent care benefits 9750.00	
e Employee's first name and initial JOHN M		Last name DOE	Suff JR	11 Nonqualified plans		12a See instructions for box 12 S 15000.00
f Employee's address and ZIP code 33 EAST 17 STREET APT 2101 NEW YORK NY 10003-2005			13 Statutory employee	Retirement plan X	Third-party sick pay	12b V 52500.00
			14 Other AUTO 12475.43 NYS 31.20		12c DD 9340.00	
					12d	
15 State Employer's state ID number NY 133249958		16 State wages, tips, etc. 325000.00	17 State income tax 62500.00	18 Local wages, tips, etc. 300000.00	19 Local income tax 18750.00	20 Locality name NYC
NJ 133249958001		60000.00	8750.00			

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

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22222		Void <input type="checkbox"/>	a Employee's social security number	For Official Use Only ► OMB No. 1545-0008		
b Employer identification number			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 Verification code		10 Dependent care benefits	
e Employee's first name and initial		Last name	Suff	11 Nonqualified plans		12a See instructions for box 12
f Employee's address and ZIP code			13 Statutory employee	Retirement plan	Third-party sick pay	12b
			14 Other		12c	
					12d	
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**

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