

2009 Form W-2



Contact your payroll department
to make changes on
names, addresses, or Social Security numbers
prior to issuing 2009 Forms W-2.

The employee name
on the Form W-2
must match
the Social Security
card to be valid.

FORM W-2 Wage and Tax Statement				Dept. of the Treasury • Internal Revenue Service																																								
Copy C For EMPLOYEE'S RECORDS (See notice on back of copy 2)				This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.																																								
These substitute W-2 Wage and Tax Statements are acceptable for filing with your Federal, State and Local Income Tax Returns. If you worked in multiple locations, or had several forms of special compensation, you may receive more than one of these documents.																																												
All four copies of your W-2 are on this page, separated by perforations. The white copies are for your tax returns; the blue copy is for your records. General instructions for these forms, including an explanation of the letter codes used in box 12 are on the other side of the page. To the right is an explanation of the contents of the wage boxes on your W-2. Please note that the Gross amount shown may include adjustments.				<table border="1"> <thead> <tr> <th></th> <th>Federal Box 1</th> <th>Soc. Sec. Box 3 & 7</th> <th>Medicare Box 5</th> <th>State Box 16</th> <th>Local Box 18</th> </tr> </thead> <tbody> <tr> <td>Gross</td> <td>35000.00</td> <td>35000.00</td> <td>35000.00</td> <td>35000.00</td> <td>35000.00</td> </tr> <tr> <td>Deferred Comp.</td> <td>1050.00-</td> <td></td> <td></td> <td>1050.00-</td> <td></td> </tr> <tr> <td>Group Term Life</td> <td>75.50</td> <td>75.50</td> <td>75.50</td> <td>75.50</td> <td></td> </tr> <tr> <td>Other Comp.</td> <td>225.00</td> <td></td> <td></td> <td>225.00</td> <td></td> </tr> <tr> <td>W-2 Wages</td> <td>34250.50</td> <td>35075.50</td> <td>35075.50</td> <td>34250.50</td> <td>35000.00</td> </tr> </tbody> </table>						Federal Box 1	Soc. Sec. Box 3 & 7	Medicare Box 5	State Box 16	Local Box 18	Gross	35000.00	35000.00	35000.00	35000.00	35000.00	Deferred Comp.	1050.00-			1050.00-		Group Term Life	75.50	75.50	75.50	75.50		Other Comp.	225.00			225.00		W-2 Wages	34250.50	35075.50	35075.50	34250.50	35000.00
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D. CONTROL NUMBER 102100450	This information is being furnished to the Internal Revenue Service.	2009	OMB NO. 1545-0008	1 WAGES, TIPS, OTHER COMPENSATION 34250.50	2 FEDERAL INCOME TAX WITHHELD 4523.71																																							
B. EMPLOYER'S IDENTIFICATION NUMBER 99-1234567	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 123-45-6789			3 SOCIAL SECURITY WAGES 35075.50	4 SOCIAL SECURITY TAX WITHHELD 2174.68																																							
C. EMPLOYER'S NAME, ADDRESS AND ZIP CODE GENERAL PRODUCTS 300 COMPANY STREET ANYTOWN USA 12345				5 MEDICARE WAGES AND TIPS 35075.50	6 MEDICARE TAX WITHHELD 508.59																																							
E. EMPLOYEE'S FIRST NAME AND INITIAL JOHN L LAST NAME PETERSON SUFF. APT C 2523 BELL AVENUE LAKEWOOD OH 44107 F. EMPLOYEE'S ADDRESS AND ZIP CODE				7 SOCIAL SECURITY TIPS	8 ALLOCATED TIPS																																							
				9 ADVANCE EIC PAYMENT	10 DEPENDENT CARE BENEFITS 2068.40																																							
				11 NONQUALIFIED PLANS OCOMP 225.00	12a-d C 75.50 D 1050.00																																							
15 STATE OH	EMPLOYER'S STATE ID NO. 12-123456 7	16 STATE WAGES, TIPS, ETC. 34250.50	17 STATE INCOME TAX 1768.00	18 LOCAL WAGES, TIPS, ETC. 35000.00	19 LOCAL INCOME TAX 700.00	20 LOCALITY NAME LAKEWOOD																																						
Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return				Dept. Of the Treasury - Internal Revenue Service																																								
FORM W-2 Wage and Tax Statement				2009																																								

Form W-2 boxes

- Box 1 WAGES, TIPS, OTHER COMPENSATION
- Box 2 FEDERAL INCOME TAX WITHHELD
- Box 3 SOCIAL SECURITY WAGES
- Box 4 SOCIAL SECURITY TAX WITHHELD
- Box 5 MEDICARE WAGES AND TIPS
- Box 6 MEDICARE TAX WITHHELD
- Box 7 SOCIAL SECURITY TIPS
- Box 8 ALLOCATED TIPS
- Box 9 ADVANCE EIC PAYMENT
- Box 10 DEPENDENT CARE BENEFITS
- Box 11 NONQUALIFIED PLANS
- Box 12 Refer to the Box 12 tab for box 12 codes
- Box 13 Status check boxes
- Box 14 OTHER
- Box 15 STATE
- Box 15 EMPLOYER'S STATE ID NUMBER
- Box 16 STATE WAGES, TIPS, ETC.
- Box 17 STATE INCOME TAX
- Box 18 LOCAL WAGES, TIPS, ETC.
- Box 19 LOCAL INCOME TAX
- Box 20 LOCALITY NAME
- Box A EMPLOYEE'S SOCIAL SECURITY NUMBER
- Box B EMPLOYER'S IDENTIFICATION NUMBER (EIN)
- Box C EMPLOYER'S NAME, ADDRESS AND ZIP CODE
- Box D CONTROL NUMBER
- Box E EMPLOYEE'S NAME
- Box F EMPLOYEE'S ADDRESS AND ZIP CODE

Box 12

- A Uncollected Social Security or RRTA tax on tips
- B Uncollected Medicare tax on tips
- C Taxable cost of group-term life insurance over \$50,000
- D Elective deferrals to a section 401(k) cash or deferred arrangement including a 401(k) SIMPLE
- E Elective deferrals to a section 403(b) salary reduction agreement
- F Elective deferrals to a section 408(k)(6) salary reduction (SEP)
- G Elective and non-elective deferrals and employer contributions to a section 457(b) deferred compensation plan
- H Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan
- J Nontaxable sick pay (not included in boxes 1, 3, or 5)
- K 20 percent excise tax on excess golden parachute payments
- L Substantiated Employee Business Expense reimbursement (nontaxable)
- M Uncollected Social Security or RRTA tax on taxable cost of group-term life insurance over \$50,000
- N Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000
- P Excludable moving expense reimbursement
- Q Nontaxable combat pay (not supported by Ceridian)
- R Employer contributions to your Archer medical savings account (MSA)

Box 12 continued

- S Employee salary reduction contributions to Section 408(p) (SIMPLE)
- T Adoption benefits (not included in box 1)
- V Income from exercise of nonstatutory stock option(s)
- W Employer contributions to your Health Savings Account
- Y Deferrals under a section 409A nonqualified deferred compensation plan
- Z Income under section 409A nonqualified deferred compensation plan
- AA Designated Roth contributions to a section 401(k) plan
- BB Designated Roth contributions under a section 403(b) plan

Box 13

If "Retirement Plan" is checked, special limits may apply to the amount of traditional IRA contributions that you may deduct. Also, the elective deferrals in box 12 (codes D, E, F, and S) and designated Roth contributions (codes AA and BB) for all employees and for all such plans that you belong to are generally limited to \$16,500.