

Understanding Your W2 Form

Employee's Social Security Number A		Copy B to be filed with employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service	
b Employer's identification number (EIN) B		1 Wages, tips, other compensation 1	2 Federal income tax withheld 2
c Employer's name, address, and ZIP code C		3 Social security wages 3	4 Social security withheld 4
		5 Medicare wages and tips 5	6 Medicare tax withheld 6
d Control Number D		9 Advance EIC payment 9	10 Dependent care benefits 10
e Employee's name (first, middle initial, last) E		12a See instructions for box 12 Code 12	12b Code
		12c Code	12d Code
F		13 Retirement Plan ☐ Third party sick pay ☐	14 Other 14
f Employee's address and ZIP code			
15 State 15	Employer's state I.D. number	16 State wages, tips, etc. 16	17 State income tax 17
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Form W-2 Wages and Tax Statement		2024 Department of the Treasury – Internal Revenue Service	

Income 1.) Federal – Total Taxable Wages, Gross Pay minus and Tax Deferred/Pre-Tax deductions. 3.) Total Taxable Wages subject to Social Security Tax. Can be deferred by Section 125 Tax Deferred/Pre-Tax deductions. 5.) Total Taxable Wages subject to Medicare Tax. Can be deferred by Section 125 Tax Deferred/Pre-Tax deductions. 16.) State – Total Taxable Wages, Gross Pay minus and Tax Deferred/Pre-Tax deductions. This may or may not be the same as box 1.	Taxes 2.) Total Federal Income Tax withheld from wages for the calendar year. 4.) Individual's portion of Social Security Tax withheld. 6.) Individual's portion of the Medicare Tax withheld. 12.) Compensation with special tax qualifications such as 403(b), 457(b) contributions, Group Term Life, Roth, Non-Taxable Sick Pay, etc. (Please see Form W2 Reference Guide for Box 12 codes). 17.) Total Local Income Tax withheld.	Personal Information A.) Individual's Social Security Number E. & F.) Individual's name and mailing address.	Employer Information B.) Federal – Employer's Identification Number (EIN). C.) Employer's Name and Business Address. 15.) Employer's State abbreviation and ID Number.
		Miscellaneous 9.) Not used – nothing should be in this box. 10.) Dependent Care Benefits such as daycare paid or incurred by an employee. 14.) Reported amounts for FEHB Premiums, FSA amounts withheld, TSP refunds, Other Allowance payments (foreign/non-foreign, living, repayments or sick leave) not included in Boxes 1, 3, and 5.	Identification D.) Control number to help Employers identify/archive W2 forms.