

22222

a Employee's social security number

000-00-0000

OMB No. 1545-0008

b Employer identification number (EIN) 41-0000000		1 Wages, tips, other compensation <b>47,000</b>		2 Federal income tax withheld	
c Employer's name, address, and ZIP code Joy Lutheran Church 987 Main St Anytown, IL 60001		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 Advance EIC payment		10 Dependent care benefits	
e Employee's first name and initial Last name Suff. Rev. Sue Doe 123 Main St Anytown, IL 60001		11 Nonqualified plans		12a <b>E</b>   <b>1,000</b>	
		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b	
		14 Other <b>Housing 1,500</b>		12c	
				12d	
f Employee's address and ZIP code					
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

**SAMPLE**