

W-2 COPY D

FOR EMPLOYER

THESE ARE YOUR REFERENCE COPIES

The following states do not require, or accept, the annual filing of the W-2 Copy 1 forms, therefore, your 'Filing and Reference Set' will not contain this copy:

California, Iowa, New York, Oregon

The states of Illinois and Ohio also do not require, or accept, the annual filing of the W-2 Copy 1 forms, however your 'Filing and Reference' set will contain this copy with a message in the employee name/address box stating not to file, but retain for a number of years.

The Employee's and Reference Copy D sets do include these forms.

*** Note to clients using Full Level Tax Filing Service -**

ADP is transmitting Copy A information returns directly to the Social Security Administration on your behalf.

Do Not file the paper formats which could result in duplication of information.

Employers, Please Note—

Specific information needed to complete Form W-2 is available in a separate booklet titled the 2019 General Instructions for Forms W-2 and W-3. You can order those instructions and additional forms at www.irs.gov/OrderForms.

Caution: Do not send the SSA Forms W-2 and W-3 that you have printed from IRS.gov. The SSA is unable to process these forms. Instead, you can create and submit them online. See *E-filing*, later.

Due dates. By January 31, 2020, furnish Copies B, C, and 2 to each person who was your employee during 2019. Mail or electronically file Copy A of Form(s) W-2 and W-3 with the SSA by January 31, 2020. See the separate instructions.

Need help? If you have questions about reporting on Form W-2, call the information reporting customer service site toll free at 866-455-7438 or 304-263-8700 (not toll free). For TTY/TDD equipment for persons who are deaf, hard of hearing, or have a speech disability, call 304-579-4827 (not toll free).

E-filing. If you file 250 or more Forms W-2, you must file electronically. Even if you aren't required to file electronically, doing so can save you time and effort. Employers may now use the SSA's W-2 Online service to create, save, print, and submit up to 50 Form(s) W-2 at a time over the Internet. When you *e-file* with the SSA, no separate Form W-3 filing is required. An electronic Form W-3 will be created for you by the W-2 Online service. For information, visit the SSA's Employer W-2 Filing Instructions & Information website at www.SSA.gov/employer.

Future developments. Information about any future developments affecting Form W-2 and its instructions (such as legislation enacted after we release them) will be posted at www.irs.gov/FormW2.

Void <input type="checkbox"/>	a Employee's social security number 080-88-0123	OMB No. 1545-0008 IXS 000001			
b Employer identification number (EIN) 90-0908008		1 Wages, tips, other compensation 13199.94		2 Federal income tax withheld 139.88	
c Employer's name, address, and ZIP code 534 W 42ND STREET CONDO ASSOCI 225 W 35TH ST 14TH FL NEW YORK, NY 10001		3 Social security wages 13199.94		4 Social security tax withheld 818.40	
		5 Medicare wages and tips 13199.94		6 Medicare tax withheld 191.40	
		7 Social security tips		8 Allocated tips	
d Control number 000001 R6/IXS		9		10 Dependent care benefits	
e Employee's first name and initial Last name ARTUR UJKA 6022 GROVE ST 1F RIDGEWOOD, NY 11385		11 Nonqualified plans		12a See instructions for box 12 Code	
		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b Code	
		14 Other 20.28 NY PFL 31.20 VPDI		12c Code	
				12d Code	
f Employee's address and ZIP code					
15 State Employer's state ID number NY 90-0908008	16 State wages, tips, etc. 13199.94	17 State income tax 210.08	18 Local wages, tips, etc. 13199.94	19 Local income tax 157.82	20 Locality name NYC RES

W-2 Wage and Tax Statement

Form Copy D — For Employer

2019

Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction
Act Notice, see separate instructions.

Void <input checked="" type="checkbox"/>	a Employee's social security number	OMB No. 1545-0008			
b Employer identification number (EIN)		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		10 Dependent care benefits	
e Employee's first name and initial Last name		11 Nonqualified plans		12a See instructions for box 12 Code	
		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b Code	
		14 Other		12c Code	
				12d Code	
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

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			13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b Code	
			14 Other	12c Code	
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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

W-2 Wage and Tax Statement
Form

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2019

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***** TOTALS *****

For: Batch No. 2019/4/93482
For: Company R6/ IXS
Dept MS

1 TOTAL EMPLOYEES
20.28 NY PFL (Box 14)
31.20 VPDI (Box 14)
13,199.94 State Wages (Box 16)
210.08 State Income Tax (Box 17)
13,199.94 Local Wages (Box 18)
157.82 Local Income Tax (Box 19)