

Reporting on Form W-2
is not free at
all

22222		Void <input type="checkbox"/>		a Employee's social security number 106-50-1158		OMB No. 1545-0008	
b Employer identification number (EIN) 13-2804148				1 Wages, tips, other compensation 37658.35		2 Federal income tax withheld 3933.73	
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK, NY 10001				3 Social security wages 60533.35		4 Social security tax withheld 2542.40	
				5 Medicare wages and tips 60533.35		6 Medicare tax withheld 877.73	
				7 Social security tips		8 Allocated tips	
d Control number				9		10 Dependent care benefits	
e Employee's name, address, and ZIP code CLAUDE A SIMON 71 TONJES ROAD CALLICOON, NY 12723				11 Nonqualified plans		12a See instructions for box 12 D 12 22875.00	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
				14 Other SDI 28.80		12c	
						12d	
15 State Employer's state ID number NY 132804148		16 State wages, tips, etc. 37658.35		17 State income tax 1636.28		18 Local wages, tips, etc.	
						19 Local income tax	
						20 Locality name	

Form **W-2** Wage and Tax Statement
Copy D - For Employer or
Copy 1 - For State, City, or Local Tax Department

2012

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