

a Control number		OMB No. 1545-0008		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.									
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 Employee's social security number				9 Advance EIC payment		10 Dependent care benefits							
e Employee's first name and initial		Last name		Suft		11 Nonqualified plans							
f Employee's address and ZIP code				13 Statutory employee		12a See instructions for box 12							
				Federal contract		12b							
				Third-party sick pay		12c							
				14 Other		12d							
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	

Form **W-2** Wage and Tax Statement

2006

Department of the Treasury—Internal Revenue Service

Copy C—For EMPLOYEE'S RECORDS (see Notice to Employee on back of Copy B.)