

2013

Wage and Tax Statement

W-2

Important: Attach this form to the back of your Form 540, 540 2EZ, or Form 540NR (Long or Short).

Name(s) as shown on tax return

SSN or ITIN

Form fields for name and SSN/ITIN, with the SSN/ITIN field circled in red.

Caution: If this form is filled out do not send your Form(s) W-2 to the Franchise Tax Board. If your Form(s) W-2 are from multiple states, attach copies showing California tax withheld to this schedule. If this schedule is blank, attach your Form(s) W-2 to the lower front of your tax return. All fields must be completed. DO NOT ATTACH PAYMENT TO THIS SCHEDULE.

*Employee's Social Security Number, name, and address must be the same as the information on the Form(s) W-2.

Table with columns: W-2 Information, 1st W-2, 2nd W-2. Rows include: a. Employee's social security number, b. Employer identification number (EIN), c. Employer's name, Address, City, State, Zip Code, e. Employee's first, middle initial and last name, f. Address, City, State, Zip Code, 1. Wages, tips, other compensation, 2. Federal income tax withheld, 3. Social security wages, 4. Social security tax withheld, 6. Medicare tax withheld, 7. Social security tips, 8. Allocated tips (not included in box 1), 10. Dependent care benefits, 11. Nonqualified plans.



W-2 Information	1 st W-2		2 nd W-2	
	Codes	Amounts	Codes	Amounts
12. Codes and amounts	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13. Check the appropriate box for: Statutory employee, Retirement plan, or Third-party sick pay	<input type="checkbox"/> Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay		<input type="checkbox"/> Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay	
14. SDI, VPDI, or CA SDI (from box 14 or 19)	Type <input type="text"/>	Amount <input type="text"/>	Type <input type="text"/>	Amount <input type="text"/>
15. State and employer's State ID number	State <input type="text"/>	Employer's state ID number <input type="text"/>	State <input type="text"/>	Employer's state ID number <input type="text"/>
16. State wages, tips, etc.	<input type="text"/>		<input type="text"/>	
17. State income tax	<input type="text"/>		<input type="text"/>	

This space reserved for 2D barcode