

222 <input type="checkbox"/>		a Employee's social security number 010-00-0101		OMB No. 1545-0008			
b Employer identification number (EIN) 16-0000000			1 Wages, tips, other compensation 4000		2 Federal income tax withheld 424		
c Employer's name, address, and ZIP code UNIVERSITY of CALIFORNIA 456 UNIVERSITY ST COLLEGETOWN, CA 00000			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. JOY KIM 789 UNIVERSITY AVE COLLEGETOWN, CA 00000			11 Nonqualified plans		12a C o d e		
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o d e		
			14 Other		12c C o d e		
					12d C o d e		
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	
CA	45-6000000	4000.00	200.00				