SAMPLE

	a Employee's social security number 123-45-6789	OMB No. 1545-0029	**Safe, accurate, FAST! Use** IRS e-file — Visit the IRS website at **www.irs.gov/efile**.
b Employer identification number (EIN) 12-3456789		**1** Wages, tips, other compensation 80,000.00	**2** Federal income tax withheld 9,200.00
c Employer's name, address, and ZIP code Northstar Demo Payroll LLC 125 Example Plaza, Suite 210 New York, New York 10001		**3** Social security wages 80,000.00	**4** Social security tax withheld 4,960.00
		5 Medicare wages and tips 80,000.00	**6** Medicare tax withheld 1,160.00
		7 Social security tips 0.00	**8** Allocated tips 0.00
d Control number QA-W2-2026-01		**9**	**10** Dependent care benefits 0.00
		11 Nonqualified plans 0.00	**12a** See instructions for box 12 Code DD 9,600.00
e Employee's first name and initial: Alex Q Last name: Sample Suff.: Jr. 74 Sample Street, Apt 4C Brooklyn, NY 11201		**13** Statutory employee ☐ Retirement plan ☒ Third-party sick pay ☐	**12b** Code W 1,800.00
		14a Other NY SDI 31.20	**12c** Code AA 2,400.00
			12d Code L 350.00
f Employee's address and ZIP code		**14b** Treasury Tipped Occupation Code(s)	

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
NY	NY-DEMO-001	80,000.00	3,100.00	80,000.00	2,650.00	New York City
NJ	NJ-DEMO-002	12,000.00	275.00	0.00	0.00	None

Form **W-2** **Wage and Tax Statement** 2026

Department of the Treasury—Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

SAMPLE

	a Employee's social security number 123-45-6789	OMB No. 1545-0029	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) 12-3456789		**1** Wages, tips, other compensation 80,000.00	**2** Federal income tax withheld 9,200.00
c Employer's name, address, and ZIP code Northstar Demo Payroll LLC 125 Example Plaza, Suite 210 New York, New York 10001		**3** Social security wages 80,000.00	**4** Social security tax withheld 4,960.00
		5 Medicare wages and tips 80,000.00	**6** Medicare tax withheld 1,160.00
		7 Social security tips 0.00	**8** Allocated tips 0.00
d Control number QA-W2-2026-01		**9**	**10** Dependent care benefits 0.00
		11 Nonqualified plans 0.00	**12a** See instructions for box 12 Code DD 9,600.00
e Employee's first name and initial: Alex Q Last name: Sample Suff.: Jr. 74 Sample Street, Apt 4C Brooklyn, NY 11201		**13** Statutory employee ☐ Retirement plan ☒ Third-party sick pay ☐	**12b** Code W 1,800.00
		14a Other NY SDI 31.20	**12c** Code AA 2,400.00
			12d Code L 350.00
f Employee's address and ZIP code		**14b** Treasury Tipped Occupation Code(s)	

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
NY	NY-DEMO-001	80,000.00	3,100.00	80,000.00	2,650.00	New York City
NJ	NJ-DEMO-002	12,000.00	275.00	0.00	0.00	None

Form W-2 Wage and Tax Statement 2026 Department of the Treasury—Internal Revenue Service

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

Safe, accurate, FAST! Use IRS e-file

SAMPLE

	a Employee's social security number 123-45-6789	OMB No. 1545-0029

b Employer identification number (EIN) 12-3456789	**1** Wages, tips, other compensation 80,000.00	**2** Federal income tax withheld 9,200.00
c Employer's name, address, and ZIP code Northstar Demo Payroll LLC 125 Example Plaza, Suite 210 New York, New York 10001	**3** Social security wages 80,000.00	**4** Social security tax withheld 4,960.00
	5 Medicare wages and tips 80,000.00	**6** Medicare tax withheld 1,160.00
	7 Social security tips 0.00	**8** Allocated tips 0.00
d Control number QA-W2-2026-01	**9**	**10** Dependent care benefits 0.00
	11 Nonqualified plans 0.00	**12a** Code DD 9,600.00
e Employee's first name and initial: Alex Q Last name: Sample Suff.: Jr. 74 Sample Street, Apt 4C Brooklyn, NY 11201	**13** Statutory employee ☐ Retirement plan ☒ Third-party sick pay ☐	**12b** Code W 1,800.00
	14a Other NY SDI 31.20	**12c** Code AA 2,400.00
		12d Code L 350.00
f Employee's address and ZIP code	**14b** Treasury Tipped Occupation Code(s)	

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
NY	NY-DEMO-001	80,000.00	3,100.00	80,000.00	2,650.00	New York City
NJ	NJ-DEMO-002	12,000.00	275.00	0.00	0.00	None

Form W-2 Wage and Tax Statement 2026 Department of the Treasury—Internal Revenue Service

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

SAMPLE

22222

a Employee's social security number
123-45-6789

OMB No. 1545-0029

b Employer identification number (EIN)
12-3456789

c Employer's name, address, and ZIP code
Northstar Demo Payroll LLC
125 Example Plaza, Suite 210
New York, New York 10001

d Control number
QA-W2-2026-01

e Employee's first name and initial: Alex Q
Last name: Sample
Suff.: Jr.

74 Sample Street, Apt 4C
Brooklyn, NY 11201

f Employee's address and ZIP code

1 Wages, tips, other compensation	80,000.00
2 Federal income tax withheld	9,200.00
3 Social security wages	80,000.00
4 Social security tax withheld	4,960.00
5 Medicare wages and tips	80,000.00
6 Medicare tax withheld	1,160.00
7 Social security tips	0.00
8 Allocated tips	0.00
9	
10 Dependent care benefits	0.00
11 Nonqualified plans	0.00
12a Code DD	9,600.00
12b Code W	1,800.00
12c Code AA	2,400.00
12d Code L	350.00

13 Statutory employee: ☐ Retirement plan: ☒ Third-party sick pay: ☐

14a Other
NY SDI 31.20

14b Treasury Tipped Occupation Code(s)

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
NY	NY-DEMO-001	80,000.00	3,100.00	80,000.00	2,650.00	New York City
NJ	NJ-DEMO-002	12,000.00	275.00	0.00	0.00	None

Form **W-2** **Wage and Tax Statement** 2026

Department of the Treasury—Internal Revenue Service

Copy 1—For State, City, or Local Tax Department

SAMPLE

VOID ☐

a Employee's social security number: 123-45-6789

OMB No. 1545-0029

b Employer identification number (EIN): 12-3456789

c Employer's name, address, and ZIP code:
Northstar Demo Payroll LLC
125 Example Plaza, Suite 210
New York, New York 10001

d Control number: QA-W2-2026-01

e Employee's first name and initial: Alex Q
Last name: Sample
Suff.: Jr.

74 Sample Street, Apt 4C
Brooklyn, NY 11201

f Employee's address and ZIP code

1 Wages, tips, other compensation: 80,000.00	**2** Federal income tax withheld: 9,200.00
3 Social security wages: 80,000.00	**4** Social security tax withheld: 4,960.00
5 Medicare wages and tips: 80,000.00	**6** Medicare tax withheld: 1,160.00
7 Social security tips: 0.00	**8** Allocated tips: 0.00
9	**10** Dependent care benefits: 0.00
11 Nonqualified plans: 0.00	**12a** See instructions for box 12 — Code DD: 9,600.00
13 Statutory employee: ☐ Retirement plan: ☒ Third-party sick pay: ☐	**12b** Code W: 1,800.00
14a Other: NY SDI 31.20	**12c** Code AA: 2,400.00
14b Treasury Tipped Occupation Code(s)	**12d** Code L: 350.00

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
NY	NY-DEMO-001	80,000.00	3,100.00	80,000.00	2,650.00	New York City
NJ	NJ-DEMO-002	12,000.00	275.00	0.00	0.00	None

Form **W-2** **Wage and Tax Statement** 2026

Department of the Treasury—Internal Revenue Service

Copy D—For Employer

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.