

# W-2 2017 Wage and Tax Statement

Copy C – For the employee's records

Employee's name, address, and zip code <b>Jane Sample 123 Main St. Somewhere, OR 98765</b>			Employer's name, address, and zip code <b>Workplace 456 Job St. Somewhere, OR 98765</b>		
Employee's social security number <b>123-45-6789</b>			Employer's identification number (EIN) <b>12-3456789</b>		
1 Wages, tips, other compensation <b>16500.25</b>		2 Federal income tax withheld <b>2097.54</b>			
3 Social security wages <b>16500.25</b>		4 Social security tax withheld <b>1023.02</b>			
5 Medicare wages and tips <b>239.25</b>		6 Medicare tax withheld <b>239.25</b>			
7 Social security tips			8 Allocated tips		
10 Dependent care benefits			11 Nonqualified plans		
13 Statutory Employee	Retirement Plan	3rd Party Sick Pay	12a		
14 Other			12b		
			12c		
15 State OR	Employer's state ID number <b>123-4567-8</b>		12d		
16 State wages, tips, etc. <b>16500.25</b>		17 State income tax <b>404.26</b>			
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

If line 10 (taxable income) is—		And you are—				If line 10 (taxable income) is—		And you are—				If line 10 (taxable income) is—		And you are—			
At least	But less than	Single	Married filing jointly *	Married filing separately	Head of a household	At least	But less than	Single	Married filing jointly *	Married filing separately	Head of a household	At least	But less than	Single	Married filing jointly *	Married filing separately	Head of a household
		Your tax is—						Your tax is—						Your tax is—			
<b>3,000</b>						<b>6,000</b>						<b>9,000</b>					
3,000	3,050	303	303	303	303	6,000	6,050	603	603	603	603	9,000	9,050	903	903	903	903
3,050	3,100	308	308	308	308	6,050	6,100	608	608	608	608	9,050	9,100	908	908	908	908
3,100	3,150	313	313	313	313	6,100	6,150	613	613	613	613	9,100	9,150	913	913	913	913
3,150	3,200	318	318	318	318	6,150	6,200	618	618	618	618	9,150	9,200	918	918	918	918
3,200	3,250	323	323	323	323	6,200	6,250	623	623	623	623	9,200	9,250	923	923	923	923
3,250	3,300	328	328	328	328	6,250	6,300	628	628	628	628	9,250	9,300	928	928	928	928
3,300	3,350	333	333	333	333	6,300	6,350	633	633	633	633	9,300	9,350	933	933	933	933
3,350	3,400	338	338	338	338	6,350	6,400	638	638	638	638	9,350	9,400	938	938	938	938
3,400	3,450	343	343	343	343	6,400	6,450	643	643	643	643	9,400	9,450	943	943	943	943
3,450	3,500	348	348	348	348	6,450	6,500	648	648	648	648	9,450	9,500	948	948	948	948
3,500	3,550	353	353	353	353	6,500	6,550	653	653	653	653	9,500	9,550	953	953	953	953
3,550	3,600	358	358	358	358	6,550	6,600	658	658	658	658	9,550	9,600	958	958	958	958
3,600	3,650	363	363	363	363	6,600	6,650	663	663	663	663	9,600	9,650	963	963	963	963
3,650	3,700	368	368	368	368	6,650	6,700	668	668	668	668	9,650	9,700	968	968	968	968
3,700	3,750	373	373	373	373	6,700	6,750	673	673	673	673	9,700	9,750	973	973	973	973
3,750	3,800	378	378	378	378	6,750	6,800	678	678	678	678	9,750	9,800	978	978	978	978
3,800	3,850	383	383	383	383	6,800	6,850	683	683	683	683	9,800	9,850	983	983	983	983
3,850	3,900	388	388	388	388	6,850	6,900	688	688	688	688	9,850	9,900	988	988	988	988
3,900	3,950	393	393	393	393	6,900	6,950	693	693	693	693	9,900	9,950	993	993	993	993
3,950	4,000	398	398	398	398	6,950	7,000	698	698	698	698	9,950	10,000	998	998	998	998
<b>4,000</b>						<b>7,000</b>						<b>10,000</b>					
4,000	4,050	403	403	403	403	7,000	7,050	703	703	703	703	10,000	10,050	1,013	1,013	1,013	1,013
4,050	4,100	408	408	408	408	7,050	7,100	708	708	708	708	10,050	10,100	1,018	1,018	1,018	1,018
4,100	4,150	413	413	413	413	7,100	7,150	713	713	713	713	10,100	10,150	1,023	1,023	1,023	1,023
4,150	4,200	418	418	418	418	7,150	7,200	718	718	718	718	10,150	10,200	1,028	1,028	1,028	1,028
4,200	4,250	423	423	423	423	7,200	7,250	723	723	723	723	10,200	10,250	1,033	1,033	1,033	1,033
4,250	4,300	428	428	428	428	7,250	7,300	728	728	728	728	10,250	10,300	1,038	1,038	1,038	1,038
4,300	4,350	433	433	433	433	7,300	7,350	733	733	733	733	10,300	10,350	1,043	1,043	1,043	1,043
4,350	4,400	438	438	438	438	7,350	7,400	738	738	738	738	10,350	10,400	1,048	1,048	1,048	1,048
4,400	4,450	443	443	443	443	7,400	7,450	743	743	743	743	10,400	10,450	1,053	1,053	1,053	1,053
4,450	4,500	448	448	448	448	7,450	7,500	748	748	748	748	10,450	10,500	1,058	1,058	1,058	1,058
4,500	4,550	453	453	453	453	7,500	7,550	753	753	753	753	10,500	10,550	1,063	1,063	1,063	1,063
4,550	4,600	458	458	458	458	7,550	7,600	758	758	758	758	10,550	10,600	1,068	1,068	1,068	1,068
4,600	4,650	463	463	463	463	7,600	7,650	763	763	763	763	10,600	10,650	1,073	1,073	1,073	1,073
4,650	4,700	468	468	468	468	7,650	7,700	768	768	768	768	10,650	10,700	1,078	1,078	1,078	1,078
4,700	4,750	473	473	473	473	7,700	7,750	773	773	773	773	10,700	10,750	1,083	1,083	1,083	1,083
4,750	4,800	478	478	478	478	7,750	7,800	778	778	778	778	10,750	10,800	1,088	1,088	1,088	1,088
4,800	4,850	483	483	483	483	7,800	7,850	783	783	783	783	10,800	10,850	1,093	1,093	1,093	1,093
4,850	4,900	488	488	488	488	7,850	7,900	788	788	788	788	10,850	10,900	1,098	1,098	1,098	1,098
4,900	4,950	493	493	493	493	7,900	7,950	793	793	793	793	10,900	10,950	1,103	1,103	1,103	1,103
4,950	5,000	498	498	498	498	7,950	8,000	798	798	798	798	10,950	11,000	1,108	1,108	1,108	1,108
<b>5,000</b>						<b>8,000</b>						<b>11,000</b>					
5,000	5,050	503	503	503	503	8,000	8,050	803	803	803	803	11,000	11,050	1,133	1,133	1,133	1,133
5,050	5,100	508	508	508	508	8,050	8,100	808	808	808	808	11,050	11,100	1,138	1,138	1,138	1,138
5,100	5,150	513	513	513	513	8,100	8,150	813	813	813	813	11,100	11,150	1,143	1,143	1,143	1,143
5,150	5,200	518	518	518	518	8,150	8,200	818	818	818	818	11,150	11,200	1,148	1,148	1,148	1,148
5,200	5,250	523	523	523	523	8,200	8,250	823	823	823	823	11,200	11,250	1,153	1,153	1,153	1,153
5,250	5,300	528	528	528	528	8,250	8,300	828	828	828	828	11,250	11,300	1,158	1,158	1,158	1,158
5,300	5,350	533	533	533	533	8,300	8,350	833	833	833	833	11,300	11,350	1,163	1,163	1,163	1,163
5,350	5,400	538	538	538	538	8,350	8,400	838	838	838	838	11,350	11,400	1,168	1,168	1,168	1,168
5,400	5,450	543	543	543	543	8,400	8,450	843	843	843	843	11,400	11,450	1,173	1,173	1,173	1,173
5,450	5,500	548	548	548	548	8,450	8,500	848	848	848	848	11,450	11,500	1,178	1,178	1,178	1,178
5,500	5,550	553	553	553	553	8,500	8,550	853	853	853	853	11,500	11,550	1,183	1,183	1,183	1,183
5,550	5,600	558	558	558	558	8,550	8,600	858	858	858	858	11,550	11,600	1,188	1,188	1,188	1,188
5,600	5,650	563	563	563	563	8,600	8,650	863	863	863	863	11,600	11,650	1,193	1,193	1,193	1,193
5,650	5,700	568	568	568	568	8,650	8,700	868	868	868	868	11,650	11,700	1,198	1,198	1,198	1,198
5,700	5,750	573	573	573	573	8,700	8,750	873	873	873	873	11,700	11,750	1,203	1,203	1,203	1,203
5,750	5,800	578	578	578	578	8,750	8,800	878	878	878	878	11,750	11,800	1,208	1,208	1,208	1,208
5,800	5,850	583	583	583	583	8,800	8,850	883	883	883	883	11,800	11,850	1,213	1,213	1,213	1,213
5,850	5,900	588	588	588	588	8,850	8,900	888	888	888	888	11,850	11,900	1,218	1,218	1,218	1,218
5,900	5,950	593	593	593	593	8,900	8,950	893	893	893	893	11,900	11,950	1,223	1,223	1,223	1,223
5,950	6,000	598	598	598	598	8,950	9,000	898	898	898	898	11,950	12,000	1,228	1,228	1,228	1,228

\* This column must also be used by a qualifying widow(er).

(Continued)

Filing status: Single Married filing jointly Married filing separately Head of household Qualifying widow(er)
Your first name and initial Last name Your social security number
Your standard deduction: Someone can claim you as a dependent You were born before January 2, 1954 You are blind
If joint return, spouse's first name and initial Last name Spouse's social security number
Spouse standard deduction: Someone can claim your spouse as a dependent Spouse was born before January 2, 1954 Full-year health care coverage or exempt (see inst.)
Spouse is blind Spouse itemizes on a separate return or you were dual-status alien
Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Campaign (see inst.) You Spouse
City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. If more than four dependents, see inst. and check here

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes instructions for dependents.

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Signature and occupation fields for taxpayer and spouse, including Identity Protection PIN entry boxes.

Paid Preparer Use Only

Preparer information fields: Preparer's name, signature, PTIN, Firm's EIN, Firm's name, address, and phone number. Includes checkboxes for 3rd Party Designee and Self-employed.

Main tax form grid with 23 rows. Includes sections for Wages, Tax-exempt interest, Qualified dividends, IRAs, Social security benefits, Total income, Adjusted gross income, Standard deduction or itemized deductions, Taxable income, Tax, Total tax, Federal income tax withheld, Refundable credits, Refund, and Amount You Owe. Includes a 'Standard Deduction for' box on the left.