

WAGE AND TAX STATEMENT—1970

(For use in States or Cities authorizing combined form)

Employer's State Identification Number

Copy A—

For Internal Revenue Service

Type or print EMPLOYER'S Federal identification number, name, and address above.

FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS
Federal income tax withheld	Wages paid subject to withholding in 1970 ¹	Other compensation paid in 1970 ²	F.I.C.A. employee tax withheld ³	Total F.I.C.A. wages paid in 1970 ⁴	1. Single 2. Married
EMPLOYEE'S social security number ▶			Name of State	State Form No.	State income tax withheld
Type or print EMPLOYEE'S name and address (including ZIP code) above.			Name of City	City Form No.	City income tax withheld
			<small>*See Circ. E for sick pay reporting. **Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. ² Report salary or other employee compensation which was not subject to withholding. See Circular E. ³ One-eighth of this amount was withheld to finance the cost of Hospital Insurance Benefits. The remainder is for old-age, survivors, and disability insurance. ⁴ Includes tips reported by employee.</small>		
			Uncollected Employee Tax on Tips . . . \$		

FORM W-2 Department of the Treasury, Internal Revenue Service

16-80571-1

EMPLOYER: See instructions on back of copy D.

WAGE AND TAX STATEMENT—1970

(For use in States or Cities authorizing combined form)

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16-80571-1

EMPLOYER: See instructions on back of copy D.

WAGE AND TAX STATEMENT—1970

(For use in States or Cities authorizing combined form)

Employer's State Identification Number

Copy 1—For
State or City Tax Dept.

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FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS
Federal income tax withheld	Wages paid subject to withholding in 1970 ¹	Other compensation paid in 1970	F.I.C.A. employee tax withheld	Total F.I.C.A. wages paid in 1970	1. Single 2. Married
EMPLOYEE'S social security number ▶			Name of State		State Form No.
			Name of City		City Form No.
					State income tax withheld
					City income tax withheld
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FOR STATE OR CITY USE ONLY					
Type or print EMPLOYEE'S name and address (including ZIP code) above.					
Employee's copy and employer's copy compared					

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FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS
Federal income tax withheld	Wages paid subject to withholding in 1970 ¹	Other compensation paid in 1970	F.I.C.A. employee tax withheld	Total F.I.C.A. wages paid in 1970	1. Single 2. Married
EMPLOYEE'S social security number ▶			Name of State		State Form No.
			Name of City		City Form No.
					State income tax withheld
					City income tax withheld
<small>*See Circ. E for sick pay reporting. **Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. INSTRUCTIONS TO EMPLOYERS: State or city copies of this wage and tax statement should be prepared and filed for employees in accordance with State or city instructions.</small>					
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Copy B—To be filed with employee's FEDERAL tax return

Type or print EMPLOYER'S Federal identification number, name, and address above.

FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS
Federal income tax withheld	Wages paid subject to withholding in 1970 ³	Other compensation paid in 1970 ²	F.I.C.A. employee tax withheld ³	Total F.I.C.A. wages paid in 1970 ⁴	1. Single 2. Married
EMPLOYEE'S social security number ▶			Name of State	State Form No.	State income tax withheld
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Type or print EMPLOYEE'S name and address (including ZIP code) above.			* Excludable sick pay. ** Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. ² Add this item to wages in figuring the amount to be reported as wages and salaries on your income tax return. ³ One-eighth of this amount was withheld to finance the cost of Hospital Insurance Benefits. The remainder is for old-age, survivors, and disability insurance. ⁴ Includes tips reported by employee.		
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FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS
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Copy C—
For employee's records

Type or print EMPLOYER'S Federal identification number, name, and address above.

FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS
Federal income tax withheld	Wages paid subject to withholding in 1970 ¹	Other compensation paid in 1970 ²	F.I.C.A. employee tax withheld ³	Total F.I.C.A. wages paid in 1970 ⁴	1. Single 2. Married
EMPLOYEE'S social security number ▶			Name of State		State Form No.
			Name of City		City Form No.
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			City income tax withheld		
<small>* Excludable sick pay. ** Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. ² Add this item to wages in figuring the amount to be reported as wages and salaries on your income tax return. ³ One-eighth of this amount was withheld to finance the cost of Hospital Insurance Benefits. The remainder is for old-age, survivors, and disability insurance. ⁴ Includes tips reported by employee.</small>					
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FORM W-2 Department of the Treasury, Internal Revenue Service

16-80571-1

NOTICE TO EMPLOYEE:

- 1. Income Tax Wages.**—This statement is important. Copy B must be filed with your U.S. Income Tax Return for 1970 and Copy 2 must be filed with your State or City Income Tax Return for 1970. If your social security number, name, or address is stated incorrectly, correct the information on copies B and 2 and notify your employer.
- 2. Social Security Wages.**—If your wages were subject to social security taxes, but are not shown, your social security wages are the same as wages shown under "FEDERAL INCOME TAX INFORMATION," but not more than \$7,800.
- 3. Credit For F.I.C.A. Tax.**—If more than \$374.40 of F.I.C.A. (social security and hospital insurance) employee tax was withheld during 1970 because you received wages from more than one employer, the excess should be claimed as a credit against your Federal income tax. See instructions with your Federal Income tax return.
- 4.** A copy of this form has been sent to the Internal Revenue Service.

☆ U. S. GOVERNMENT PRINTING OFFICE 1970—370-017 EI36 - 2441915

NOTICE TO EMPLOYEE:

- 1. Income Tax Wages.**—This statement is important. Copy B must be filed with your U.S. Income Tax Return for 1970 and Copy 2 must be filed with your State or City Income Tax Return for 1970. If your social security number, name, or address is stated incorrectly, correct the information on copies B and 2 and notify your employer.
- 2. Social Security Wages.**—If your wages were subject to social security taxes, but are not shown, your social security wages are the same as wages shown under "FEDERAL INCOME TAX INFORMATION," but not more than \$7,800.
- 3. Credit For F.I.C.A. Tax.**—If more than \$374.40 of F.I.C.A. (social security and hospital insurance) employee tax was withheld during 1970 because you received wages from more than one employer, the excess should be claimed as a credit against your Federal income tax. See instructions with your Federal Income tax return.
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WAGE AND TAX STATEMENT—1970

(For use in States or Cities authorizing combined form)

Copy 2—To be filed
with Employee's State or
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Employer's State Identification Number

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FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS	*
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EMPLOYEE'S social security number ▶			Name of State	State Form No.	State income tax withheld	
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² Excludable sick pay. **Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. NOTICE TO EMPLOYEE THIS STATEMENT IS IMPORTANT. IT MUST BE ATTACHED TO YOUR STATE OR CITY INCOME TAX RETURN TO CLAIM CREDIT FOR ANY TAX WITHHELD.						
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Employee's copy and employer's copy compared						

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WAGE AND TAX STATEMENT—1970

(For use in States or Cities authorizing combined form)

Copy 2—To be filed
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Employer's State Identification Number

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EMPLOYEE'S social security number ▶			Name of State	State Form No.	State income tax withheld	
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WAGE AND TAX STATEMENT—1970

(For use in States or Cities authorizing combined form)

Copy 2—To be filed
with Employee's State or
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Employer's State Identification Number

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FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		STATUS	*
Federal income tax withheld	Wages paid subject to withholding in 1970 ²	Other compensation paid in 1970	F.I.C.A. employee tax withheld	Total F.I.C.A. wages paid in 1970	1. Single 2. Married	**
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			City income tax withheld		••
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			Uncollected Employee Tax on Tips . . . \$		

FORM W-2 Department of the Treasury, Internal Revenue Service

10-80871-3

WAGE AND TAX STATEMENT—1970

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Federal income tax withheld	Wages paid subject to withholding in 1970 ¹	Other compensation paid in 1970 ²	F.I.C.A. employee tax withheld ³	Total F.I.C.A. wages paid in 1970 ⁴	1. Single 2. Married
EMPLOYEE'S social security number ▶			Name of State		State Form No.
			Name of City		City Form No.
Type or print EMPLOYEE'S name and address (including ZIP code) above.			State income tax withheld		•
			City income tax withheld		••
			<small>*See Circ. E for sick pay reporting. **Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. ² Report salary or other employee compensation which was not subject to withholding. See Circular E. ³ One-eighth of this amount was withheld to finance the cost of Hospital Insurance Benefits. The remainder is for old-age, survivors, and disability insurance. ⁴ Includes tips reported by employee.</small>		
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EMPLOYEE'S social security number ▶			Name of State		State Form No.
			Name of City		City Form No.
Type or print EMPLOYEE'S name and address (including ZIP code) above.			State income tax withheld		•
			City income tax withheld		••
			<small>*See Circ. E for sick pay reporting. **Gross wages for State if different from Federal. ¹ Includes tips reported by employee. Amount is before payroll deductions or sick pay exclusion. ² Report salary or other employee compensation which was not subject to withholding. See Circular E. ³ One-eighth of this amount was withheld to finance the cost of Hospital Insurance Benefits. The remainder is for old-age, survivors, and disability insurance. ⁴ Includes tips reported by employee.</small>		
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FORM W-2 Department of the Treasury, Internal Revenue Service

10-80571-1

TO EMPLOYER: While use of this 6-part wage and tax statement is acceptable in most States, if you are in doubt contact your appropriate State or city official.

1. Prepare this form for each employee (a) from whom income tax has been withheld during the year or (b) whose wages (including tips reported), for purposes of income tax withholding, exceeded the amount of one withholding exemption for any payroll period (even though no income tax was withheld). If "other compensation" plus wages, if any, of \$600 or more is paid to an employee in the year, copy A of Form W-2 must be furnished to the Internal Revenue Service, even though no wages are subject to income tax withholding.

2. Fill in—(a) Your identification number, name, and address.

(b) Amount of income tax deducted and withheld. If no amount was deducted, enter "None" or "0."

(c) Total wages paid and tips reported before any payroll deductions. Payments of "sick pay" and non-cash remuneration are considered wages. If an employer keeps the records described in Circular E he may also enter amounts of excludable sick pay in the space designated.

(d) Other compensation. This block should include all other compensation (amounts includable in gross income but not subject to income tax withholding) paid to an employee.

(e) Total amount of F.I.C.A. employee tax (*not the employer tax*) deducted and withheld, if any (but if there was an adjustment in

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E136 - 2441915

TO EMPLOYER: While use of this 6-part wage and tax statement is acceptable in most States, if you are in doubt contact your appropriate State or city official.

1. Prepare this form for each employee (a) from whom income tax has been withheld during the year or (b) whose wages (including tips reported), for purposes of income tax withholding, exceeded the amount of one withholding exemption for any payroll period (even though no income tax was withheld). If "other compensation" plus wages, if any, of \$600 or more is paid to an employee in the year, copy A of Form W-2 must be furnished to the Internal Revenue Service, even though no wages are subject to income tax withholding.

2. Fill in—(a) Your identification number, name, and address.

(b) Amount of income tax deducted and withheld. If no amount was deducted, enter "None" or "0."

(c) Total wages paid and tips reported before any payroll deductions. Payments of "sick pay" and non-cash remuneration are considered wages. If an employer keeps the records described in Circular E he may also enter amounts of excludable sick pay in the space designated.

(d) Other compensation. This block should include all other compensation (amounts includable in gross income but not subject to income tax withholding) paid to an employee.

(e) Total amount of F.I.C.A. employee tax (*not the employer tax*) deducted and withheld, if any (but if there was an adjustment in

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E136 - 2441915

TO EMPLOYER: While use of this 6-part wage and tax statement is acceptable in most States, if you are in doubt contact your appropriate State or city official.

1. Prepare this form for each employee (a) from whom income tax has been withheld during the year or (b) whose wages (including tips reported), for purposes of income tax withholding, exceeded the amount of one withholding exemption for any payroll period (even though no income tax was withheld). If "other compensation" plus wages, if any, of \$600 or more is paid to an employee in the year, copy A of Form W-2 must be furnished to the Internal Revenue Service, even though no wages are subject to income tax withholding.

2. Fill in—(a) Your identification number, name, and address.

(b) Amount of income tax deducted and withheld. If no amount was deducted, enter "None" or "0."

(c) Total wages paid and tips reported before any payroll deductions. Payments of "sick pay" and non-cash remuneration are considered wages. If an employer keeps the records described in Circular E he may also enter amounts of excludable sick pay in the space designated.

(d) Other compensation. This block should include all other compensation (amounts includable in gross income but not subject to income tax withholding) paid to an employee.

(e) Total amount of F.I.C.A. employee tax (*not the employer tax*) deducted and withheld, if any (but if there was an adjustment in

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1970 to correct the tax for a prior year enter the amount withheld in 1970 increased by the adjustment for an overcollection or decreased by the adjustment for an undercollection). If F.I.C.A. wages were paid or tips reported but no employee tax was deducted, enter "None" or "0."

(f) Total wages paid and tips reported (*before payroll deductions*) subject to the Federal Insurance Contributions Act. Non-cash remuneration is considered wages. If not subject to F.I.C.A., enter "None" or "0." No F.I.C.A. wage entry need be made if (1) F.I.C.A. wages exactly equal the total wages for income tax withholding purposes, or (2) F.I.C.A. wages are \$7,800 and the total wages for income tax withholding purposes exceed \$7,800.

(g) Uncollected employee tax on tips. See Circular E for instructions.

(h) The employee's social security number, name, and address.

(i) State and local government employers who have been assigned an identification number with the prefix 69 should also show this number.

3. Give copies B, C and 2 to the employee (a) on or before January 31 following the calendar year if the employee is in your employ at the close of such year, or (b) within 30 days after the last payment of wages, if his employment is terminated before the close of such year.

4. Forward copy A to the Internal Revenue Service. For further information see Form 941 and Circular E. Farmers, see Circular A.

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