

Name _____

Address _____

Federal I.D. No. _____

State I.D. No. _____

2020 W-2 WAGES PAID

Please contact our office if
commodity wages were issued

Payee Name & Address (State if dependent child & if 18 or over)	Payee Social Security Number	Gross Amount (Amount Paid Before Taxes)	Soc. Sec. Tax Withheld	Medicare Tax Withheld	Federal Tax Withheld	State Tax Withheld	Net Wages (Amount of Check)

If you made monthly payroll deposits for agricultural wages, please record those payments below:

Total state withholding paid per quarter on above wages:

1st Qtr. _____
 2nd Qtr. _____
 3rd Qtr. _____
 4th Qtr. _____

	Gross Wage	Federal Pmts
January -	_____	_____
February -	_____	_____
March -	_____	_____
April -	_____	_____
May -	_____	_____
June -	_____	_____

	Gross Wage	Federal Pmts
July -	_____	_____
August -	_____	_____
September -	_____	_____
October -	_____	_____
November -	_____	_____
December -	_____	_____