

2022

Wage and Tax Statement

W-2

Important: Attach this schedule to the back of your original or amended Form 540, Form 540 2EZ, or Form 540NR.

Caution: If this schedule is filled out, **do not** send your federal Form(s) W-2 to the Franchise Tax Board. If your federal Form(s) W-2 are from multiple states, **attach** copies showing California tax withheld to this schedule. If this schedule is blank, attach your federal Form(s) W-2 to the lower front of your tax return. **DO NOT ATTACH PAYMENT TO THIS SCHEDULE.**

*Employee's social security number, name, and address must be the same as the information on federal Form(s) W-2.

W-2 Information

<p>a. Employee's social security number*</p> <input type="radio"/> <input style="width: 100px; height: 20px;" type="text"/>	<p>c. Employer's name</p> <input type="radio"/> <input style="width: 300px; height: 20px;" type="text"/>						
<p>b. Employer identification number (EIN)</p> <input type="radio"/> <input style="width: 100px; height: 20px;" type="text"/>	<p>Employer's address</p> <input type="radio"/> <input style="width: 300px; height: 20px;" type="text"/> City <input style="width: 100px; height: 20px;" type="text"/> State <input style="width: 30px; height: 20px;" type="text"/> ZIP code <input style="width: 100px; height: 20px;" type="text"/>						
<p>e. Employee's first name*</p> <input type="radio"/> <input style="width: 100px; height: 20px;" type="text"/>	<p>Initial*</p> <input type="radio"/> <input style="width: 30px; height: 20px;" type="text"/>	<p>Last name*</p> <input type="radio"/> <input style="width: 200px; height: 20px;" type="text"/>	<p>Suffix*</p> <input type="radio"/> <input style="width: 30px; height: 20px;" type="text"/>				
<p>f. Employee's address*</p> <input type="radio"/> <input style="width: 300px; height: 20px;" type="text"/> City* <input style="width: 100px; height: 20px;" type="text"/> State* <input style="width: 30px; height: 20px;" type="text"/> ZIP code* <input style="width: 100px; height: 20px;" type="text"/>							
<p>1. Wages, tips, other compensation</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>	<p>4. Social security tax withheld</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>	<p>8. Allocated tips (not included in box 1)</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>					
<p>2. Federal income tax withheld</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>	<p>6. Medicare tax withheld</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>	<p>10. Dependent care benefits</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>					
<p>3. Social security wages</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>	<p>7. Social security tips</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>	<p>11. Nonqualified plans</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>					
<p>12. Codes and amounts</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"> <p>12a. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p> </td> <td style="width: 50%;"> <p>12c. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p> </td> </tr> <tr> <td> <p>12b. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p> </td> <td> <p>12d. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p> </td> </tr> </table>				<p>12a. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p>	<p>12c. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p>	<p>12b. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p>	<p>12d. Code <input style="width: 30px; height: 20px;" type="text"/> Amount <input style="width: 150px; height: 20px;" type="text"/></p>
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<p>13. Check the appropriate box for: Statutory employee, Retirement plan, or Third-party sick pay</p> <p> <input type="radio"/> <input style="width: 20px; height: 20px;" type="checkbox"/> Statutory employee <input type="radio"/> <input style="width: 20px; height: 20px;" type="checkbox"/> Retirement plan <input type="radio"/> <input style="width: 20px; height: 20px;" type="checkbox"/> Third-party sick pay </p>							
<p>14. SDI, VPDI, or CA SDI (from federal Form W-2, box 14 or 19)</p> <table border="0" style="width: 100%;"> <tr> <td>Type <input style="width: 30px; height: 20px;" type="text"/></td> <td>Amount <input style="width: 150px; height: 20px;" type="text"/></td> </tr> </table>		Type <input style="width: 30px; height: 20px;" type="text"/>	Amount <input style="width: 150px; height: 20px;" type="text"/>	<p>16. State wages, tips, etc.</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>			
Type <input style="width: 30px; height: 20px;" type="text"/>	Amount <input style="width: 150px; height: 20px;" type="text"/>						
<p>15. State and employer's state ID number</p> <table border="0" style="width: 100%;"> <tr> <td>State <input style="width: 30px; height: 20px;" type="text"/></td> <td>Employer's state ID number <input style="width: 150px; height: 20px;" type="text"/></td> </tr> </table>		State <input style="width: 30px; height: 20px;" type="text"/>	Employer's state ID number <input style="width: 150px; height: 20px;" type="text"/>	<p>17. State income tax</p> <input type="radio"/> <input style="width: 150px; height: 20px;" type="text"/>			
State <input style="width: 30px; height: 20px;" type="text"/>	Employer's state ID number <input style="width: 150px; height: 20px;" type="text"/>						

Franchise Tax Board Privacy Notice on Collection

Our privacy notice can be found in annual tax booklets or online. Go to ftb.ca.gov/privacy to learn about our privacy policy statement, or go to ftb.ca.gov/forms and search for **1131** to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection - Aviso de Privacidad del Franchise Tax Board sobre la Recaudación. To request this notice by mail, call 800.338.0505 and enter form code **948** when instructed.