SPECIMEN - DOCUMENT FICTIF - DEMO AI Automation and Tech

Form W-2 Wage and Tax Statement 2025

Copy B - To Be Filed With Employee's FEDERAL Tax Return

a Employee's social security number **000-12-3456**	b Employer identification number (EIN) **00-0000001**	
c Employer's name, address, and ZIP code **Sunshine Dental Group LLC** **100 Example Ave, Ocala FL**	1 Wages, tips, other compensation **48,250.00**	2 Federal income tax withheld **5,120.00**
	3 Social security wages **48,250.00**	4 Social security tax withheld **2,991.50**
e Employee's first name and initial Last name **Sophie Martin** **22 Sample St, Ocala FL**	5 Medicare wages and tips **48,250.00**	6 Medicare tax withheld **699.63**
15 State **FL**		