



## State of New Jersey

DEPARTMENT OF THE TREASURY  
DIVISION OF TAXATION  
PO BOX 269  
TRENTON NJ 08695-0269

# NOTICE TO EMPLOYERS AND OTHER PREPARERS OF 2009 W-2 WAGE AND TAX STATEMENTS

In order to assist New Jersey employers and other preparers of Form W-2, Wage and Tax Statements, regarding the proper reporting of calendar year 2009 withholdings of employee contributions for:

- Unemployment Insurance
- Workforce Development/Supplemental Workforce Fund
- New Jersey Disability Insurance
- Family Leave Insurance

The New Jersey Department of Labor and Workforce Development and the New Jersey Division of Taxation have established official 2009 W-2 reporting guidelines for New Jersey. For information related to the New Jersey Department of Labor and Workforce Development call (609) 633-6400.

Filled-in sample W-2's showing the placement of the required New Jersey information are attached.

General information regarding preparation of Form W-2 and the placement of State Income Tax data can be obtained by calling the Taxation Customer Service Center at (609) 292-6400.

# 2009 W-2 SAMPLE: PREFERRED

## How to Report Worker Contributions for Unemployment Insurance, Workforce Development Partnership Fund/Supplemental Workforce Fund, State Disability Insurance, Family Leave Insurance, Employee Withholding for New Jersey Gross Income Tax

		a. Employee's social security number				
b Employer identification number (EIN)		1 Wages, tips, other compensation		2 Federal income tax withheld		
c Employer's name, address, and ZIP code		3 Social security wages		4 Social security tax withheld		
		5 Medicare wages and tips		6 Medicare tax withheld		
		7 Social security tips		8 Allocated tips		
d Control number		9 Advance EIC payment		10 Dependent care benefits		
e Employee's first name and initial      Last name      Suff.		11 Nonqualified plans		12a See instructions for box 12		
		13. Statutory Retirement Third-party employee      plan      sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b		
		14. Other		12c		
		UI/WF/SWF -122.82 DI -144.50 DI P.P. # XXXXXXXXXXXX		12b		
f. Employee's address and ZIP code						
15 State <b>NJ</b>	Employer's state ID number <b>234-567-890/000</b>	16 State wages, tips, etc. <b>32,250.00</b>	17 State income tax <b>525.00</b>	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
FLI P.P. #		<b>XXXXXXXXXX</b>	→ <b>26.01 - FLI</b>			

**W-2**

Wage and Tax Statement

**2009**

Department of Treasury - Internal Revenue Service

**New Jersey Taxpayer Identification Number**  
 Call the New Jersey Division of Taxation's Customer Service Center at 609-292-6400 or the New Jersey Department of Labor and Workforce Development at 609-633-6400 if you are unsure of your New Jersey Taxpayer Identification Number.

**Family Leave Insurance Private Plan Number (FLI P.P.#)**  
 To be entered only by employers who have an approved contributory Private Family Leave Insurance Plan. Phone 609-292-2720 if you are unsure of your Private Plan Number.

**Worker Contributions**

- Unemployment Insurance, Workforce Development Partnership Fund/Supplemental Workforce Fund.
- State Disability Insurance
- Family Leave Insurance

Please Note:  
 The Taxable Wage Base for UI/WF/SWF, DI, and FLI purposes for 2009 is \$28,900.00.

**Disability Insurance Private Plan Number (DI P. P. Number)**  
 To be entered only by employers who have an approved contributory Private Disability Plan. Phone 609-292-2720 if you are unsure of your Private Plan Number.

# 2009 W-2 SAMPLE: ACCEPTABLE ALTERNATE

## How to Report Worker Contributions for Unemployment Insurance, Workforce Development Partnership Fund/Supplemental Workforce Fund, State Disability Insurance, Family Leave Insurance, Employee Withholding for New Jersey Gross Income Tax

		a. Employee's social security number				
b Employer identification number (EIN)		1 Wages, tips, other compensation		2 Federal income tax withheld		
c Employer's name, address, and ZIP code		3 Social security wages		4 Social security tax withheld		
		5 Medicare wages and tips		6 Medicare tax withheld		
		7 Social security tips		8 Allocated tips		
d Control number		9 Advance EIC payment		10 Dependent care benefits		
e Employee's first name and initial		Last name		Suff.		
		11 Nonqualified plans		12a See instructions for box 12		
		13. Statutory Retirement Third-party employee plan sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C O D E		
		14. Other		12c C O D E		
f. Employee's address and ZIP code				12b C O D E		
15 State <b>NJ</b>	Employer's state ID number <b>234-567-890/000</b>	16 State wages, tips, etc. <b>32,250.00</b>	17 State income tax <b>525.00</b>	18 Local wages, tips, etc. <b>XXXXXXXXXXXX</b>	19 Local income tax <b>122.82</b> <b>144.50</b>	20 Locality name <b>UI/WF/SWF</b> <b>DI</b>
	<b>DI P.P. # XXXXXXXXXXXX</b>		<b>FLI P.P. #</b>	<b>XXXXXXXXXXXX</b>	<b>26.01</b>	<b>FLI</b>

Department of Treasury - Internal Revenue Service

**W-2** Wage and Tax Statement

**2009**

**Disability Insurance Private Plan Number (DI P.P. Number)**

To be entered only by employers who have an approved contributory Private Disability Plan. Phone 609-292-2720 if you are unsure of your Private Plan Number.

**New Jersey Taxpayer Identification Number**

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**Worker Contributions**

- Unemployment Insurance, Workforce Development Partnership Fund/Supplemental Workforce Fund.
- State Disability Insurance
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Please Note:

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