

# Answers to Study Guide Questions

## CHAPTER 9

### PART 1 True/False

- |      |       |
|------|-------|
| 1. F | 6. T  |
| 2. F | 7. F  |
| 3. T | 8. T  |
| 4. F | 9. T  |
| 5. T | 10. F |

### PART 2 Completion—Language of Business

- quarter
- Form W-2
- employer identification number
- Payroll Tax Expense
- Workers' compensation insurance
- W-3
- Form 941

### PART 3 Completing Form W-2

a Control number 22222		Void <input type="checkbox"/>	For Official Use Only ▶ OMB No. 1545-0008		
b Employer identification number 72-1162127		1 Wages, tips, other compensation \$ 34,218.42	2 Federal income tax withheld \$ 3,716.22		
c Employer's name, address, and ZIP code Barclay Company 1620 HAMPTON PLACE Boston, MA 02116		3 Social security wages \$ 34,218.42	4 Social security tax withheld \$ 2,121.54		
		5 Medicare wages and tips \$ 34,218.42	6 Medicare tax withheld \$ 496.17		
		7 Social security tips \$ 0	8 Allocated tips \$ 0		
		9 Advance EIC payment \$ 0	10 Dependent care benefits \$		
d Employee's social security number 561-24-5229	11 Nonqualified plans \$		12a See instructions for box 12 \$		
e Employee's first name and initial JUNE CLARA		Last name Perkins		12b \$	
f Employee's address and ZIP code 2219 Henderson Street Boston, MA 02121		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12c \$	
		14 Other		12d \$	
15 State Employer's state ID number MAI 42-6916	16 State wages, tips, etc. \$ 34,218.42	17 State income tax \$ 1,780.04	18 Local wages, tips, etc. \$	19 Local income tax \$	20 Locality name

Form **W-2** Wage and Tax Statement (99)

Copy A For Social Security Administration—Send this entire page with Form W-3 to the Social Security Administration; photocopies are not acceptable.

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