|    |                   | Employee  | Ref                     | erence        | Cop                       | У                    |
|----|-------------------|---|-------------------------|---------------|---------------------------|----------------------|
| V  | V-                |   | Stateme                 | nd Tax<br>nt  | <b>2</b> (                | 020<br>No. 1545-0008 |
| d  |                   | ol number<br>220 A13  | Dept.                   | Corp.         | Emplo                     | yer use only         |
| С  | Emple             | oyer's name, a  | ddress, a               | nd ZIP cod    | е                         |                      |
|    | 563               | t and Rest<br>Stoney Br<br>neapolis, M                      | ook Rd                  | 1             |                           |                      |
|    | Ben<br>432<br>Min | oyee's name, a<br>njamin P. C<br>6 Aldrich F<br>neapolis, I | harles<br>Rd<br>MN 5541 | 2             |                           | A number             |
| _  |                   | <u>14-023285</u>  |                         | 5             | 77-22-                    | 3048                 |
| 1  | wages             | s, tips, other c<br>1800                                    | • 1                     | ∠ Federa      |                           | tax withheld         |
| 3  | Social            | security wag  | es                      | 4 Social      | security                  | tax withheld         |
| 5  | Medic             | are wages and   |                         | 6 Medica      | re tax wi                 | thheld<br>261.00     |
| 7  | Social            | security tips   | 0.00                    | 8 Allocat     | ed tips                   | 400.00               |
| 9  |                   |   |                         | 10 Depend     | dent care                 | benefits<br>543.21   |
| 11 | Nonqu             | ialified plans<br>300                                       | 0.00                    | 12a See insti | 256.                      | 00                   |
|    |                   | form  |                         | Х             | 532.<br>425.<br>Ret. plan | 3rd party sick p     |
| 15 |                   | Employer's s  |                         |               |                           | ips, etc.            |
|    | MN                | 795037  |                         | 1800          | 0.00                      |                      |

18 Local wages, tips, etc.

18 Local wages, tips, etc.

17700.00

20 Locality name

MPLS

MN 795037
17 State income tax
1260.00
19 Local income tax
500.00