R	EISSUED	a Employee's socia	•				Safe, Accurat	e,	- CF		Visit the	IRS Website	
ST	ATEMENT	38	5-38-5851	OMB N	lo. 1545-	8000	FAST! Use		√fi	6	at www.i	rs.gov/efile.	
<b>b</b> Employer identification number					1	1 Wages, tips, other compensation				Federal income tax withheld			
12-2884163						183512.13				46609.25			
<b>c</b> Employ	er's name, address, and Z	IP code			3	3 Social security wages				4 Social security tax withheld			
Chang-Bishop and Sons						184995.21				14152.13			
6271 Perkins Shores New Karen VT 44538-9111					5 Medicare wages and tips				6 Medicare tax withheld				
					174853.24				5070.74				
	New Karen VT 44538-9111					7 Social security tips				8 Allocated tips			
						1849	95.21				1748	53.24	
<b>d</b> Control	number				9	9 Advance EIC payment				10 Dependent care benefits			
2618502									230				
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
_	Matthew Knox					149				3361			
F						13 Statutory Retirement Third-party employee plan sick pay				12b			
48170 Sanders Pine Apt. 727 West Jeanette WV 21892-3572					14 Other (see enclosed Notice to Employee)					Н	297	297	
									12c		1		
											547		
									12d				
										D	337		
f Employ	ree's address and ZIP code	9											
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips, etc.	19	Local inc	ome tax	(	20 Locality nam	ne
FL	216-76	-355	98122.32	3073.96		1618	60.33	33	3462	. 4		Tony Roa	ads
VA	095-18	-851	85422.47	3530.78		1683	46.86	34	1801	.28		Angelica V	View

Wage and Tax Statement

Form W-2

5070

Department of the Treasury--Internal Revenue Service

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

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

F	REISSUED		This information is being furnished to the Internal Revenue Service. If you are required									
S	<b>TATEMENT</b>	3	85-38-5851	OMB N	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.							
<b>b</b> Emplo	<b>b</b> Employer identification number					Vages, tips, other compensation	Federal income tax withheld					
12-2884163					183512.13			46609.25				
<b>c</b> Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Chang-Bishop and Sons					184995.21			14152.13				
6271 Perkins Shores					5 N	Medicare wages and tips	6 Medicare tax withheld 5070.74					
						174853.24						
	New Karen VT 44538-9111					Social security tips	8 Allocated tips					
						184995.21	174853.24					
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	2618502								230			
e Emplo	e Employee's first name and initial Last name					lonqualified plans	12a See instructions for box 12					
					149			3361				
	Matthew Knox					13 Statutory Retirement Third-party			1			
48170 Sanders Pine Apt. 727 West Jeanette WV 21892-3572					employee plan sick pay  X  14 Other (see enclosed Notice to Employee)			н 297				
								12c 547				
				D 337								
f Employee's address and ZIP code												
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		Local income tax	20 Locality name			
FL	216-76	355	98122.32	3073.96		161860.33	33 33462.4			Tony Roads		
VA	095-18-851 85422.47 3530.78		168346.86 3		34	801.28	Angelica View					

Wage and Tax

Form W-2 **Statement**Copy C For EMPLOYEE'S RECORDS.
(See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

