REISSUED a Employee's social security number					Safe, Ac	curate,			Visit the	IRS Website		
STATEME	NT 5	65-19-3967	OMB N	o. 1545-(0008 FAST! U	se	G~IL	le)	at www.i	rs.gov/efile.		
b Employer identification number				1 Wages, tips, other compensation			2	2 Federal income tax withheld				
56-259	2018				226445.13			33314.83				
c Employer's name, ad	dress, and ZIP code			3 Social security wages				4 Social security tax withheld				
Khan, Jefferson and Lopez LLC				228777.28			1	17501.46				
07450 Holt Glens Suite 446				5 Medicare wages and tips			6					
North Carmen PA 54242-5729					185016.55				5365.48			
					7 Social security tips				8 Allocated tips 185016.55			
1 October 1					228777.28							
d Control number					9 Advance EIC payment 10 Dependent care benefits				eneilis			
9145436								237				
e Employee's first nam	e and initial Last nam	е		11	Nonqualified plans		12a	See ins	structions	for box 12		
				207				1121				
Brian Lopez					13 Statutory Retirement Third-party employee plan sick pay			12b				
1768 Willis Forest Suite 759					X	Sick pay		H	986			
Haleyshire TX 16966-9334				14 Other (see enclosed Notice to Employee)			ee) 12c					
naicybniic in 10300 3334									292			
				!			12d	12d				
								G	357			
f Employee's address	and ZIP code											
	s state ID number	16 State wages, tips, etc.	17 State income tax	Į.	18 Local wages, tips	, etc.	19 Local in	come tax		20 Locality name		
KY 9	76-89-082	122401.61	10769.09		160698.92	2	26363	.43		Johnson Rest		
AZ 0	95-15-140	120364.37	8796.1		169067.57	,	44552	.51		Sanchez Bridge		

Wage and Tax

5010

Department of the Treasury--Internal Revenue Service

Form W-2 **Statement**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	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
_	TATEMENT	56	55-19-3967	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 Emplo	yer identification number			<u>l</u>	1 V	/ages, tips, other compensation	10 10 11	2 Federal income tax withheld			
56-2592018				226445.13			33314.83				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Khan, Jefferson and Lopez LLC				228777.28			17501.46				
07450 Holt Glens Suite 446				5 Medicare wages and tips			6 Medicare tax withheld				
						185016.55		5365.48			
North Carmen PA 54242-5729				7 Social security tips			8 Allocated tips				
					228777.28		185016.55				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
9145436							237				
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Brian Lopez				207 13 Statutory Retirement Third-party employee plan sick pay			1121				
1768 Willis Forest Suite 759					x		H	986			
Haleyshire TX 16966-9334				14 Other (see enclosed Notice to Employee)			12c				
							292				
				!			12d				
							G	357			
f Employee's address and ZIP code						-					
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	ı	18 Local wages, tips, etc.	19 Lo	ocal income tax	1	20 Locality name	
KY	976-89	0-082	122401.61	10769.09		160698.92	263	363.43		Johnson Rest	
AZ	095-15	5-140	120364.37	8796.1		169067.57	445	552.51		Sanchez Bridge	

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

