Notice to Employee
Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Free me if you do not have to file a tax return. You may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income recdit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can this take the EIC if your airestement income is more than the specified amount for 2019 or if ancome is earned for services provided while you were an intained at a penal institution. For 2019 in come limits and more information, vist www.sr.goveETIC.

Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct tout aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by caling 800-772-1213. You may also wist the SSA website at www.SSA.gov.

Cost of employer-sponsored beath coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2019 and more than S8,239.80 in social security and/or TFr 1 railroad retirement (RSTA) taxes were whithed, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,835.0 in TFr 2 RSTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Wathholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

### Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the wages line of your tax return.

Box 5. Tourn she required to expert this amount on the federal income tax withheld line of your tax return.

Box 5. Tourn she required to expert this amount on the rederal income tax withheld line of your tax return.

Box 6. This amount in the destructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as Well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as Well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown in Box 5, as Well as the 0.9% Additional Medicare Tax on tips. Include this tax on form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security or security wage base).

D—Belevite deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under the control of the control of

\$200,000.

Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you recreded a smaller amount. If you have records that show the actual amount of tips your received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate

must report as income and on other tips you did not report to your employer. By filing Form 4137, so use social security in well be credited to by your social security record (asset to figure your benefits), so you social security in well be credited to by your social security record (asset to figure your benefits). So you social security in well be credited to by your social security record (asset to figure your benefit share). As well as the first of the properties of the first one of the calculation you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D. E. F. and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only limited to a total of \$19,000 (\$13,000 if you only limited to a total of \$19,000 (\$13,000 if you only flow EA, Explained in Pub. \$71). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to

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included in income: See the assultances for Point 1990.

Note, If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is

shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form

SIMPLE retirement account that is part of a section 401(k) arrangement

E-Elective deferrals under a section 403(b) salary reduction agree F-Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to moute any taxable and nontaxable amounts. ompute any taxanie and nonaxanie amounts.

—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social scurity wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting

requirements.

W—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plun) to your health savings account. Report on Form 8889, Health Savings Accounts

(HSAs). V—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not

BB—Designated Koth contributions under a section 43(5) plan
DD—Cost of emphyser-sponsored health coverage. The amount reported with Code DD is not
taxable to the contributions under a governmental section 457(b) plan. This amount does not
apply to contributions under a tax-except organization section 457(b) plan. This amount does not
apply to contributions under at sux-except organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reinbursement arrangement
GG—Income from qualified equalty grants under section 83(i) elections as of the close of the calendar year
Box 1.3. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement
Arrangements (IRAs).
Box 14. Employers may use this box to report information such as state disability insurance taxes
withheld, union dues, uniform payments, health insurance premiums deducted, montacable income,
withheld union dues, uniform payments, health insurance premiums deducted, montacable income,
withheld union dues, uniform payments, health insurance premiums deducted, montacable income,
Raifoud employers use this box to report information such as state disability insurance taxes
withheld union Macken article to the control of the properties of the close of the control of the properties of the control of the properties of the properties of the control of the proper

#### Form W-2 Wage and Tax Statement 2019

Copy C, for employee's records

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be immorsed on your if this income is subable and you fall to report it.

	. J					, ., .c. cp.c,	may be imposed	on you if this income is taxable and you fa	
d Control number  0067-11024854 b Employer's identification		Void 0000001075- umber a Employee's social security number			c Employer's name, address, and ZIP code OCEAN DINING LLC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
		41 1907		PO BOX 1384 HAMPTON NH 03843		1 Wages, tips, other compensation 10432.98	2 Federal Income tax withheld 1145.06		
Employee	plan						3 Social Security wages 4 Social Security tax withheld		
12 See Instrs. for Box 12		14 Other			e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
					MUSOBEK SHODMONOV 73 OCEAN BLD		7 Social Security tips	8 Allocated Tips	
					HAMPTON NH 03842		10 Dependent care benefits	11 Nonqualified plans	
15 State Employer	's state I.D	. No.	16 State wages,	tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
15 State Employer	's state I.D	. No.	16 State wages,	tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

# Form W-2 Wage and Tax Statement

## 2019

## Copy B, to be filed with employee's FEDERAL tax return

$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				c Employer's name, address, and ZIP code OCEAN DINING LLC PO BOX 1384		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008  1 Wages, tips, other compensation 2 Federal Income tax withheld		
45-5063375	840-41-1897			HAMPTON NH 03843		10432.98	1145.06	
13 Statutory Re Employee pla	tirement in	Third-party sick pay			-	3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12 14 Other		her		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
				MUSOBEK SHODMONOV 73 OCEAN BLD		7 Social Security tips	8 Allocated Tips	
				HAMPTON NH 03842		10 Dependent care benefits	11 Nonqualified plans	
15 State Employer's stat	e I.D. No.	l 6 State wages, ti	ips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

#### Form W-2 Wage and Tax Statement 2019

d Control number Void X						c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number				ity number	1 Wag				es, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Retirement Third-party			nort.									
13 Statutory Retirement Third- Employee plan sick pa						3 Soci	al Security wages	4 Social Security tax withheld				
12 See Instrs. for Box 12 14 Oth		Other		e Employee's name, address, and ZIP code		5 Med	care wages and tips	6 Medicare tax withheld				
									7 Soci	al Security tips	8 Allocated Tips	
									10 Dep	pendent care benefits	11 Nonqualified plans	
15 State Employer's state I.D. No.		No.	16 State v	vages, tips, etc	1	17 State income tax	18 Local wages, tips, etc.		19 Local income tax	20 Locality name		