	a Employee's social s	OMP N	MB No. 1545-0008								
b Employer identification number (EIN)				1 Wages, tips, other compensation					2 Federal income tax withheld		
78-2355187				\$72,941.00				\$16,047.02			
c Employer's name, address and ZIP code				3 Social security wages				4 Social security tax withheld			
				\$76,588.05				\$23,742.30			
Zegura 56611 Hill St				5 Medicare wages and tips				6 Medicare tax withheld			
				\$76,588.05				\$22,210.53			
Scottsburg, IA 53666			7 Sc	7 Social security tips				8 Allocated tips			
			\$3	\$3,063.52				\$765.88			
d Control number RX17031				9				10 Dependent care benefits			
e Employee's first name and initial Last name Suff.			11	11 Nonqualified plans				12a See instructions for box 12			
Hermione Langenberg 4887 Elm St				13 Statutory Retirement Third-party employee Plan sick pay				12b			
Mount Crawford, RI 36485			14	14 Other				12c			
								12d			
f Employee's address and zip code											
15 State E	mployer's state ID number	16 State wages, tips, etc.	17 Stat	te income tax	18	Local wage	s, tips, etc	19 Loc	cal income tax	20 Locality name	
IA	78-2355187	\$72,941.00	\$	\$8,023.51		\$72,941.00			2,188.23	Scottsburg	