	a Employee's social security number 222-22-238	OMB No. 154	5-0008	This information is being furni are required to file a tax return may be imposed on you if this	n, a negligence penalty or	other sanction
b Employer identification number (EIN) 352335			1 Wages, tips, other compensation 52728		2 Federal income tax withheld 4900	
c Employer's name, address, and ZIP code Nunya Business 352 Howell St Dallas, TX 75671			3 Social security wages 52728 5 Medicare wages and tips 52728		4 Social security tax withheld 3271 6 Medicare tax withheld 764	
				cial security tips	8 Allocated tips	
d Control number 444			9 10 Dependent care benefits			
e Employee's first name and initial Last name Suff. Janice Sample 2120 Old Main Street Anytown, TX 12345			13 State emp	11 Nonqualified plans 12a See instructions for box 12 13 Statutory employee plan plan sick pay 14 Other 12b c c c c c c c c c c c c c c c c c c c		s for box 12
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. TX 323 52728		17 State incor	ne tax	18 Local wages, tips, etc. 52728	19 Local income tax	20 Locality name

Wage and Tax Statement

2019

Department of the Treasury-Internal Revenue Service

Safe, accurate, FAST! Use



Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)