

		a Employee's social security number <b>349-06-4719</b>		OMB No. 1545-0008 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 imposed on you if this income is taxable and you fail to report it.	
b Employer identification number (EIN) <b>06-0696766</b>			1 Wages, tips, other compensation <b>92,985</b>		2 Federal income tax withheld <b>20,457</b>
c Employer's name, address, and ZIP code <b>Pacific Backflow Company, Inc. One Lincoln Street Boston, MA 02111</b>			3 Social security wages <b>98,920</b>		4 Social security tax withheld <b>6,133</b>
			5 Medicare wages and tips <b>98,920</b>		6 Medicare tax withheld <b>1,434</b>
			7 Social security tips		8 Allocated tips
d Control number			9		10 Dependent care benefits
e Employee's first name and initial <b>Kay</b> Last name <b>George</b>  19 North Main Street Fall River Massachusetts 02720			11 Nonqualified plans		12a See instructions for box 12 <b>C</b>   <b>11,870</b>
			13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b
			14 Other		12c
					12d
f Employee's address and ZIP code					
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
<b>FL</b>	<b>00-0-1624</b>	<b>98,920</b>	<b>2,968</b>		
				20 Locality name	

Form **W-2** Wage and Tax Statement

**2020**

Department of the Treasury—Internal Revenue Service

Copy C—For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)

Safe, accurate,  
FAST! Use

