

1 Wages, tips, other compensation <div>80652.83</div>		2 Federal Income tax withheld <div>6649.30</div>	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number <div>566-97-1920</div>		Employer use only	
b Employer's FED ID number <div>94-6001323</div>		d Control number <div>00348739</div>	
c Employer's name, address, and ZIP code <div>Union Pacific Railroad 1400 Douglas St, Stop 1620 Omaha NE 68179</div>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 <div>D</div> <div>9061.69</div>	
13 Statutory Employee Retirement plan Third-Party Sick pay <div><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/></div>		12b	
		12c	
14 Other RRT1 5562.30 RRT2 4396.01 RRTM 1300.86 RRTA Compensation 89714.52		12d	
		12e	
		12f	
e Employee's first name and initial Last name Suff. <div>Lance R Murphy 1235 n hwy 91 (PO Box 77) Shelley ID 83274-0077</div>			
f Employee's address and ZIP code			
15 State ID	Employer's state ID <div>000802537</div>	18 Local wages, tips, etc	
16 State wages, tips, etc. <div>80652.83</div>		19 Local income tax	
17 State income tax <div>2766.00</div>		20 Locality name	
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2020 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation <div>80652.83</div>		2 Federal Income tax withheld <div>6649.30</div>	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number <div>566-97-1920</div>		Employer use only	
b Employer's FED ID number <div>94-6001323</div>		d Control number <div>00348739</div>	
c Employer's name, address, and ZIP code <div>Union Pacific Railroad 1400 Douglas St, Stop 1620 Omaha NE 68179</div>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 <div>D</div> <div>9061.69</div>	
13 Statutory Employee Retirement plan Third-Party Sick pay <div><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/></div>		12b	
		12c	
14 Other RRT1 5562.30 RRT2 4396.01 RRTM 1300.86 RRTA Compensation 89714.52		12d	
		12e	
		12f	
e Employee's first name and initial Last name Suff. <div>Lance R Murphy 1235 n hwy 91 (PO Box 77) Shelley ID 83274-0077</div>			
f Employee's address and ZIP code			
15 State ID	Employer's state ID <div>000802537</div>	18 Local wages, tips, etc	
16 State wages, tips, etc. <div>80652.83</div>		19 Local income tax	
17 State income tax <div>2766.00</div>		20 Locality name	
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2020 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation <div>80652.83</div>		2 Federal Income tax withheld <div>6649.30</div>	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number <div>566-97-1920</div>		Employer use only	
b Employer's FED ID number <div>94-6001323</div>		d Control number <div>00348739</div>	
c Employer's name, address, and ZIP code <div>Union Pacific Railroad 1400 Douglas St, Stop 1620 Omaha NE 68179</div>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 <div>D</div> <div>9061.69</div>	
13 Statutory Employee Retirement plan Third-Party Sick pay <div><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/></div>		12b	
		12c	
14 Other RRT1 5562.30 RRT2 4396.01 RRTM 1300.86 RRTA Compensation 89714.52		12d	
		12e	
		12f	
e Employee's first name and initial Last name Suff. <div>Lance R Murphy 1235 n hwy 91 (PO Box 77) Shelley ID 83274-0077</div>			
f Employee's address and ZIP code			
15 State ID	Employer's state ID <div>000802537</div>	18 Local wages, tips, etc	
16 State wages, tips, etc. <div>80652.83</div>		19 Local income tax	
17 State income tax <div>2766.00</div>		20 Locality name	
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2020 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation <div>80652.83</div>		2 Federal Income tax withheld <div>6649.30</div>	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number <div>566-97-1920</div>		Employer use only	
b Employer's FED ID number <div>94-6001323</div>		d Control number <div>00348739</div>	
c Employer's name, address, and ZIP code <div>Union Pacific Railroad 1400 Douglas St, Stop 1620 Omaha NE 68179</div>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 <div>D</div> <div>9061.69</div>	
13 Statutory Employee Retirement plan Third-Party Sick pay <div><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/></div>		12b	
		12c	
14 Other RRT1 5562.30 RRT2 4396.01 RRTM 1300.86 RRTA Compensation 89714.52		12d	
		12e	
		12f	
e Employee's first name and initial Last name Suff. <div>Lance R Murphy 1235 n hwy 91 (PO Box 77) Shelley ID 83274-0077</div>			
f Employee's address and ZIP code			
15 State ID	Employer's state ID <div>000802537</div>	18 Local wages, tips, etc	
16 State wages, tips, etc. <div>80652.83</div>		19 Local income tax	
17 State income tax <div>2766.00</div>		20 Locality name	
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2020 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			