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|--|--|---|--|---|--|--|--|---|--|---|--|
| | | a Employee's social security number 606482925 | | OMB No. 1545-0008 | | Safe, accurate, FAST! Use | |  | | Visit the IRS website at www.irs.gov/efile | |
| b Employer identification number (EIN) 821084392 | | | | 1 Wages, tips, other compensation 140.00 | | 2 Federal income tax withheld 0 | | | | | |
| c Employer's name, address, and ZIP code Restoring Roots Cooperative LLC 12 Parley Vale | | | | 3 Social security wages 140.00 | | 4 Social security tax withheld 8.68 | | | | | |
| | | | | 5 Medicare wages and tips 140.00 | | 6 Medicare tax withheld 2.03 | | | | | |
| | | | | 7 Social security tips | | 8 Allocated tips | | | | | |
| d Control number | | | | 9 | | 10 Dependent care benefits | | | | | |
| e Employee's first name and initial Last name Suff. Eliseo Castillo 120 webster st #1 East boston MA 02128 | | | | 11 Nonqualified plans | | 12a See instructions for box 12 e a o c | | | | | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b e a o c | | | | | |
| | | | | 14 Other | | 12c e a o c | | | | | |
| | | | | | | 12d e a o c | | | | | |
| f Employee's address and ZIP code | | | | | | | | | | | |
| 15 State Employer's state ID number MA 333333333 | | 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

Department of the Treasury—Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

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. Even if you don't 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 credit (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 the 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't take the EIC if your investment income is more than the specified amount for 2019 or if income is earned for services provided while you were an inmate at a penal institution. For 2019 income limits and more information, visit www.irs.gov/EITC. 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.**

Clergy and religious workers. If you aren't subject to social security 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-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but 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 calling 800-772-1213. You also may visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health 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 \$8,239.80 in social security and/or Tier 1 railroad retirement (RTTA) taxes were withheld, 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 \$4,836.30 in Tier 2 RTTA tax was withheld, you also may be able to claim a credit. See your Form 1040 instructions and Pub. 505, Tax Withholding and Estimated Tax.

(Also see *Instructions for Employee* on the back of Copy C.)

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|--|--|---|--|---|--|--|--|--|--|
| | | a Employee's social security number <div style="border: 1px solid black; padding: 2px; text-align: center;">217417428</div> | | Safe, accurate, FAST! Use | |  | | Visit the IRS website at www.irs.gov/efile | |
| b Employer identification number (EIN) 821084392 | | | | 1 Wages, tips, other compensation 25725.14 | | 2 Federal income tax withheld 2300.96 | | | |
| c Employer's name, address, and ZIP code Restoring Roots Cooperative LLC 12 Parley Vale | | | | 3 Social security wages 25725.14 | | 4 Social security tax withheld 1595.00 | | | |
| | | | | 5 Medicare wages and tips 25725.14 | | 6 Medicare tax withheld 373.05 | | | |
| | | | | 7 Social security tips | | 8 Allocated tips | | | |
| d Control number | | | | 9 | | 10 Dependent care benefits | | | |
| e Employee's first name and initial Last name Suff. Jacqueline Ewing 19 Hanson St Sommerville MA 02143 | | | | 11 Nonqualified plans | | 12a See instructions for box 12 <small>See instructions for box 12</small> | | | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b <small>See instructions for box 12</small> | | | |
| | | | | 14 Other | | 12c <small>See instructions for box 12</small> | | | |
| | | | | | | 12d <small>See instructions for box 12</small> | | | |
| f Employee's address and ZIP code | | | | | | | | | |
| 15 State Employer's state ID number MA 333333333 | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | | 19 Local income tax | |
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Clergy and religious workers. If you aren't subject to social security 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-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but 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 calling 800-772-1213. You also may visit the SSA website at www.SSA.gov.

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(Also see *Instructions for Employee* on the back of Copy C.)

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|--|--|---|--|--|--|--|--|---|--|--|--|
| | | a Employee's social security number <div style="border: 1px solid black; padding: 2px; text-align: center;">085 82 4123</div> | | OMB No. 1545-0008 | | Safe, accurate, FAST! Use | |  | | Visit the IRS website at www.irs.gov/efile | |
| b Employer identification number (EIN) 821084392 | | | | 1 Wages, tips, other compensation 12229.55 | | 2 Federal income tax withheld 1070.30 | | | | | |
| | | | | 3 Social security wages 12229.55 | | 4 Social security tax withheld 758.26 | | | | | |
| c Employer's name, address, and ZIP code Restoring Roots Cooperative LLC 12 Parley Vale | | | | 5 Medicare wages and tips 12229.55 | | 6 Medicare tax withheld 177.35 | | | | | |
| | | | | 7 Social security tips | | 8 Allocated tips | | | | | |
| | | | | 9 | | 10 Dependent care benefits | | | | | |
| d Control number | | | | e Employee's first name and initial Last name Suff. Jeremy M Orenstein 19 Hanson St Somerville MA 02143 | | 11 Nonqualified plans | | 12a See instructions for box 12 <small>See instructions</small> | | | |
| | | | | | | 13 <small>Statutory employee</small> <small>Retirement plan</small> <small>Third-party sick pay</small> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b <small>See instructions</small> | | | |
| | | | | | | 14 Other | | 12c <small>See instructions</small> | | | |
| | | | | | | | | 12d <small>See instructions</small> | | | |
| | | | | | | | | | | | |
| f Employee's address and ZIP code | | | | | | | | | | | |
| 15 State Employer's state ID number MA 333333333 | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | | 19 Local income tax | | 20 Locality name | |
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Form **W-2 Wage and Tax Statement** **2019**

Department of the Treasury—Internal Revenue Service

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Clergy and religious workers. If you aren't subject to social security 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-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but 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 calling 800-772-1213. You also may visit the SSA website at www.SSA.gov.

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(Also see *Instructions for Employee* on the back of Copy C.)

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|--|--|---|--|--|--|---|--|---|--|--|--|
| | | a Employee's social security number <div style="border: 1px solid black; padding: 2px; text-align: center;">221881516</div> | | OMB No. 1545-0008 | | Safe, accurate, FAST! Use | |  | | Visit the IRS website at www.irs.gov/efile | |
| b Employer identification number (EIN) 821084392 | | | | 1 Wages, tips, other compensation 11843.17 | | 2 Federal income tax withheld 1056.05 | | | | | |
| c Employer's name, address, and ZIP code Restoring Roots Cooperative LLC 12 Parley Vale | | | | 3 Social security wages 11843.17 | | 4 Social security tax withheld 734.29 | | | | | |
| | | | | 5 Medicare wages and tips 11843.17 | | 6 Medicare tax withheld 171.74 | | | | | |
| | | | | 7 Social security tips | | 8 Allocated tips | | | | | |
| d Control number | | | | 9 | | 10 Dependent care benefits | | | | | |
| e Employee's first name and initial Last name Suff. Liam Kelly 234 Hyde Park Ave, #2 Jamaica Plain MA 02130 MA 02130 | | | | 11 Nonqualified plans | | 12a See instructions for box 12 <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | | | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> | | 12b <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | | | |
| | | | | 14 Other <div style="border: 1px solid black; height: 40px; width: 100%;"></div> | | 12c <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | | | |
| | | | | | | 12d <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | | | |
| f Employee's address and ZIP code | | | | | | | | | | | |
| 15 State MA | | Employer's state ID number 333333333 | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | | 19 Local income tax | |
| | | | | | | | | | | | |

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| | | | | | | | | | |
|--|--|---|--|--|--|---|--|--|--|
| | | a Employee's social security number <div style="border: 1px solid black; padding: 2px; text-align: center;">017-70-1519</div> | | Safe, accurate, FAST! Use | |  | | Visit the IRS website at www.irs.gov/efile | |
| b Employer identification number (EIN) 821084392 | | | | 1 Wages, tips, other compensation 30194.94 | | 2 Federal income tax withheld 3735.56 | | | |
| c Employer's name, address, and ZIP code Restoring Roots Cooperative LLC 12 Parley Vale | | | | 3 Social security wages 30194.94 | | 4 Social security tax withheld 1872.11 | | | |
| | | | | 5 Medicare wages and tips 30194.94 | | 6 Medicare tax withheld 437.83 | | | |
| | | | | 7 Social security tips | | 8 Allocated tips | | | |
| d Control number | | | | 9 | | 10 Dependent care benefits | | | |
| e Employee's first name and initial Last name Suff. Noah D. McKenna 14 Chestnut Place Jamaica Plain MA 02130 | | | | 11 Nonqualified plans | | 12a See instructions for box 12 <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> | | 12b <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | |
| | | | | 14 Other <div style="border: 1px solid black; height: 40px; width: 100%;"></div> | | 12c <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | |
| | | | | | | 12d <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | |
| f Employee's address and ZIP code | | | | | | | | | |
| 15 State Employer's state ID number MA 333333333 | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | | 19 Local income tax | |
| | | | | | | | | 20 Locality name | |

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