Form W-	2 Wage and Tax Statement	7 Social security tips		1 Wages, tips, other compensation 6922.56		2 Federal income tax withheld 435.45				
c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY				8 Allocated tips		3 Social security wages 2424.72		4 Social security tax withheld 150.33		
D-55 ASB				9		5 Medicare wages and tips 2424.72		6 Medicare tax withheld 35.16		
PROVO UT 84602			10 Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12			
e Employee's name, address, and ZIP code				13 Statutory Retirement Third-party sick pay		14 Other		12b		
JASON SCOTT PORTER				b Employer identification number (EIN)		-		12c		
1565 N UNIVERSITY AVENUE #42				87-0217280 a Employee's social security number				12d		
PROVO UT 84604			647-10-5995		ļ		Coode			
15 State UT	Employer's state ID number 11691946-005-WTH	16 State wages, tips, etc 6922		17 State income tax 136.80	18 Lo	ocal wages, tips, etc.	19 Local in	come tax		20 Locality name
Copy B	 -To Be Filed With Employee's FEI	 DERAL Tax Return	1 -	This information is being furnished t	the Inte			Dept.	. of the	Treasury - IRS
					This in	OMB No. 1545-0008	Internal Revenu			ebsite at www.irs.gov/efil
				7 Social security tips	neglige	oformation is being furnished to the ence penalty or other sanction may 1 Wages, tips, other comp				able and you fail to report it.
Form W-2 Wage and Tax Statement 2015 Employer's name, address, and ZIP code			8 Allocated tips		6922.56 3 Social security wages		435.45 4 Social security tax withheld			
BRIGHAM YOUNG UNIVERSITY					2424.72		150.33			
D-55 ASB			9		5 Medicare wages and tips 2424.72		6 Medicare tax withheld 35.16			
PRO	VO UT 84602			10 Dependent care benefits		11 Nonqualified plans		12a See	instruct	ions for box 12
	e's name, address, and ZIP code			13 Statutory Retirement Third sick p	-party pay	14 Other		12b		
JASON SCOTT PORTER			b Employer identification number (EIN)		1		12c			
1565 N UNIVERSITY AVENUE #42 PROVO UT 84604			87-0217280 a Employee's social security number				12d			
				647-10-5995		-		ode		
15 State UT	Employer's state ID number	16 State wages, tips, etc. 692	2.56	17 State income tax 136.80	1 -	ocal wages, tips, etc.	19 Local in	come tax		20 Locality name
Copy C	 -For EMPLOYEE'S RECORDS (See	l e Notice to Employ	ee on	the back of Copy B.)	ON	//B No. 1545-0008		Dept	of the	Treasury - IRS
								Visit th	e IRS we	ebsite at www.irs.gov/efil
				7 Social security tips		1 Wages, tips, other comp	pensation	2 Federa	al income	tax withheld
Form W-2 Wage and Tax Statement 2015 c Employer's name, address, and ZIP code				8 Allocated tips		6922.56 3 Social security wages		435.45 4 Social security tax withheld		
BRIGHAM YOUNG UNIVERSITY					2424.72		150.33			
D-55 ASB PROVO UT 84602			9		5 Medicare wages and tips 2424.72		6 Medicare tax withheld 35.16			
FROVO 01 04002			10 Dependent care benefits		11 Nonqualified plans		12a			
e Employee's name, address, and ZIP code			13 Statutory Retirement Third-party sick pay		14 Other		12b			
JASON SCOTT PORTER			b Employer identification number (EIN) 87-0217280		-		12c			
1565 N UNIVERSITY AVENUE #42 PROVO UT 84604			a Employee's social security number		-		12d	<u> </u>		
	0 01 01001			647-10-5995		_		ode		
15 State	Employer's state ID number 11691946-005-WTH	16 State wages, tips, etc 6922		17 State income tax 136.80	18 Lo	ocal wages, tips, etc.	19 Local in	come tax		20 Locality name
	-To Be Filed With Employee's Stat					AD No. 4545 0000		Dont	of the	Treasury - IRS
Copy 2	-10 Be Filed With Employee's Stat	te, City, or Local II	ncome	e rax Heturn	ON	/IB No. 1545-0008		рері.	OI THE	rreasury - Ins
Form W-2 Wage and Tax Statement 2015			7 Social security tips		1 Wages, tips, other compensation 6922.56		2 Federal income tax withheld 435.45			
c Employer's name, address, and ZIP code			8 Allocated tips		3 Social security wages 2424.72		4 Social security tax withheld			
BRIGHAM YOUNG UNIVERSITY D-55 ASB			9		5 Medicare wages and tips		6 Medicare tax withheld			
PROVO UT 84602			10 Dependent care benefits		2424.72		35.16			
e Employee's name, address, and ZIP code				13 Statutory Retirement Third-party sick pay		14 Other	12b .			
						14 5		12c		
JASON SCOTT PORTER 1565 N UNIVERSITY AVENUE #42			b Employer identification number (EIN) 87-0217280		C Qu e					
PROVO UT 84604			a Employee's social security number $647-10-5995$				12d			
15 State	Employer's state ID number	16 State wages, tips, etc		17 State income tax	18 10	ocal wages, tips, etc.	19 Local in	come tay		20 Locality name
UT	11691946-005-WTH		2.56	136.80			- Local III			
Copy 2	 -To Be Filed With Employee's Stat	l te, City, or Local I	ncome	Tax Return	ON	ИВ No. 1545-0008	<u> </u>	Dept.	. of the	Treasury - IRS