1	39,			2 Federal income tax withheld				
	200012.7	9		23986.4				
3	Social security wages		4 Social	security t	ax withheld			
	236745.0	1				18110.99		
5	5 Medicare wages and tips 169167.74			6 Medicare tax withheld				
				4905.86				
d	Control number		Dont	Corn		Employer use only		
	3129		Dept. 150	Corp.		Employer use only A 36		
1210	3129		130			A 30		
С	Employer's name	e address	and ZIP co	nde				
		Group		ouc				
		_	_	a Apt.	534			
		_		_		471		
	шаке О	Ommys	cau Of	23	9990-04	3/L		
				Datala		"00004		
				Batch		#02021		
<u>_</u>	Employed: FFD	ID moonstate		- F	veels CC 1	numbar		
b	Employer's FED			a Emplo	yee's SSA	number 0		
	90-90217	12				O		
7	Social security ti	ins		8 Alloca	ted tips			
ľ	236745.01			7	iou tipo	169167.74		
9	Verification Code			10 Dependent care benefits				
	0					191		
11	Nonqualified plans			12a See instructions for box 12				
	173							
	-					5543		
14	Other			12b	l	808		
				12c		703		
				12d	<u> </u>	828		
				13 Stat emp.		3rd party sick pay		
- 15	F		! 7ID	X	0	0		
e/f	Employees name	e, address	and ZIP co	ae				
	Michae	.1 12	ill					
	7848 Watson Curve							
	Lake A	my AL	05886	5-0847				
		_						
15	State	Employers'	state ID no.	16 State	wages, ti	ps, etc.		
	AK	49-84-70	2		,	105195.87		
17	State income tax			18 Local wages, tips, etc.				
	11105.95			165197.41				
42					114			
19	Local income to	ax		20 Loca	lity name			

20592.2	24			James View	
	Federal Wage	Filing and	Tax	Сору	
W-2	ent		2018		
Copy B to be filed with employee's Federal Income Tax Return				OMB No. 1545-0008	