a Employee's socia	l security number .0-55-3047	OMB No	o. 1545-00		Safe, Acc FAST! Us	413	:e -	√fi			IRS Website rs.gov/efile.
b Employer identification number (EIN)				1 Wages, tips, other compensation				Federal income tax withheld			
85-0248429				205904.9				33413.79			
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld			
Arias, Myers and Butler LLC				156582.45				11978.56			
68282 Williams Club	5 Medicare wages and tips					6 Medicare tax withheld					
Davidfurt IN 025	214719.23					6226.86					
Davidfurt IN 02540-2821				7 Social security tips				8 Allocated tips			
	156582.45					214719.23					
d Control number				9				10 Dependent care benefits			
5!								231			
e Employee's first name and initial Last name Suff.				11 Nonqualified plans				12a See instructions for box 12			
				216				Ë E 2716			
Elizabeth Harvey					Retirement	Third-party		12b		· i	
4580 Jenkins Orchard				oyee	plan	sick pay		C o d e	M	735	
Jacquelinemouth MA 46884-3175				14 Other				12c			
oacquerriiemou cii					C o d		131				
							-	12d			
						C o d e	A	994			
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			20 Locality name		
KS 377-61-131	97696.01	5260.71		253551.23			36452.33			Summers Wells	
TN 113-55-172	102561.52	7529.62		2195	81.0		28:	105	. 5		Turner Valley

Wage and Tax
orm W-2 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.

Cut here. Keep lower portion for your records.

	a Employee's social security number				This information is being furnished to the Internal Revenue Service. If you are required						
		01	LO-55-30 4 7	OMB N	OMB No. 1545-0008 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				1 \	Vages, tips, other compensation		2 Federal income tax withheld				
85-0248429					205904.9		33413.79				
c Employer's name, address, and ZIP code				3 3	Social security wages		4 Social security tax withheld				
Arias, Myers and Butler LLC					156582.45		11978.56				
68282 Williams Club				5 1	Medicare wages and tips		6 Medicare tax withheld				
Davidfurt IN 02540-2821					214719.23		6226.86				
				7 :	Social security tips		8 Allocated tips				
					156582.45			214719.23			
d Control number				9		1	0 Depen	dent care b	enefits		
5515695							231				
e Employee's first name and initial Last name Suff.				11 Nonqualified plans			12a See instructions for box 12				
Elizabeth Harvey				216 13 Statutory Retirement Third-party			E 2716				
4580 Jenkins Orchard				employee plan sick pay			м 735				
Jacquelinemouth MA 46884-3175				14 Other (see enclosed Notice to Employee)			12c				
04044611161104611 111 10001 5175								131			
							12d				
								_	004		
								A	994		
f Employee	e's address and ZIP code Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	l	18 Local wages, tips, etc.	19 Loc	al income ta	x	20 Locality name	
KS	377-61		97696.01	5260.71		253551.23		52.33	••	,	
10	311-01	T 7 T	J 7 0 3 0 . U I	3200.71		233331.23	304	JZ . JJ		Summers Wells	
TN	113-55	-172	102561.52	7529.62		219581.0	281	05.5		Turner Valley	

Wage and Tax

Form W-2 **Statement**Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on the back of Copy B.)'



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

