				,			
1	1 Wages, tips, other comp. 196625.39			2 Federal income tax withheld 35884.32			
3	Casial assurity v			4 Social security tax withheld			
3	Social security wages 200379.52			4 Social	security t	ax withheid 15329.03	
	200379.5	2				15529.05	
5	Medicare wages	care wages and tips 6 Medicar			are tax withheld		
	194434.31			5638.59			
d	Control number		Dept.	Corp.		Employer use only	
183	32927		150			A 36	
С	Employer's name	o oddroce	and ZID a	ode .			
			LC and				
	720 Th	omas 1	rack <i>F</i>	Apt. 25	3		
	Johnso	nhaver	n WY 7	73034-5	606		
				Batch		#02021	
b	Employer's FED ID number			a Employee's SSA number			
	27-09165	51				0	
<u> </u>							
7	Social security to	-		8 Alloca	ted tips	104424 21	
	200379.5	2				194434.31	
9	Verification Code 10		10 Depei	10 Dependent care benefits			
			262				
11	Nonqualified pla	ans		12a See ir	struction	s for box 12	
	132			_		1000	
14	Other			12b	'	1033	
'4	Other			•		349 549	
				12d	<u>'</u> 		
				13 Stat emp.		3rd party sick pay	
				0	0	x	
e/f	Employees name	e, address	and ZIP co	de		•	
	Richar	d Smit	:h				
	550 Ha	rvey E	all				
	Port A	_		55393-4	704		
	POIL A	uma I	1E 3	,JJ333-4	104		
15	State	Employers'	state ID no.	16 State	wages, ti	os. etc.	
	NH	99-49-47			goo, a	99246.64	
17	State income tax			18 Local wages, tips, etc.			
	10098.15			197248.37			
40	1 12			00 :	194		
19	Local income to	ax		20 Loca	lity name		

22977.5		Mariah Center	
Federal Wage	Filing and Tax	Сору	
W-2 Statem		2018	
Copy B to be filed with employee's Federal	OMB No. 1545-0008		