a Employee's social security number			Safe, Accurate,		Visit t	ne IRS Website			
	11-51-0667	OMB No	o. 1545-00	ATT.	e»f	\mathcal{H}	w.irs.gov/efile.		
b Employer identification number (EIN)			1 V	Vages, tips, other compensation	2	Federal income	tax withheld		
46-4403557				244493.13		67412.66			
c Employer's name, address, and ZIP code				ocial security wages	4	4 Social security tax withheld			
Hill Inc LLC				243756.69		18647.39			
9450 Bell Springs Apt. 220			5 Medicare wages and tips			Medicare tax withheld			
				211983.89		6147.53			
Justinland MN 70003-1561			7 Social security tips			8 Allocated tips			
				243756.69			983.89		
d Control number			9		10	Dependent care	benefits		
81						233			
e Employee's first name and initial Last name	9	Suff.	11 Nonqualified plans			12a See instructions for box 12			
			246			В 5707			
Spencer Navarro			13 Statu	tory Retirement Third-party	12b		<u> </u>		
			emplo	oyee plan sick pay	С				
4913 Moore Cliff			X		o d e	F 640			
West David MS 99531-5430			14 Other			;			
west David Ms 99551-5450					C	016			
					ē	S 816			
					12d C	1			
					o d e	м 898			
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 i	income tax	20 Locality name		
OK 266-35-958	116526.25	9516.75		288411.17	3544	6.62	Gallegos Street		
AL 914-13-096	115690.37	14892.54		262746.92	25483	3.45	Orr Ford		

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.

Cut here. Keep lower portion for your records.

a Employee's social security number 741-51-0667	OMP No	This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if							
b Employer identification number			this income is taxable and you fail to report it. 1 Wages, tips, other compensation 2 Federal income tax withheld						
46-4403557	244493.13			67412.66					
c Employer's name, address, and ZIP code		3 Social security wages			4 Social security tax withheld				
Hill Inc LLC	243756.69			18647.39					
9450 Bell Springs Apt. 220	5 Medicare wages and tips			6 Medicare tax withheld					
Justinland MN 70003-1561			211983.89			6147.53			
busciniand Fin 70003-1301		7 Social security tips			8 Allocated tips				
	243756.69			211983.89					
d Control number			9			10 Dependent care benefits			
8360006		233							
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 12a See instructions for box			or box 12			
Spencer Navarro 4913 Moore Cliff			246			в 5707			
			ory Retirement Third-party yee plan sick pay		12b	I			
						640			
West David MS 99531-5430		14 Other (see enclosed Notice to Employee)			12c				
					s	816			
				-	12d				
					М	898			
f Employee's address and ZIP code				ı					
15 State Employer's state ID number 16 State wages, tips, etc. 1	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income tax		20 Locality name		
OK 266-35-958 116526.25 9	9516.75		288411.17	35	446.62		Gallegos Street		
AL 914-13-096 115690.37 1	14892.54		262746.92	25	483.45		Orr Ford		

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

