				I				
1	Wages, tips, other comp. 116253.68		2 Federal income tax withheld					
			39082.07					
3	Social socurity v	V2006		4 Social	cocurity t	av withhold		
3	Social security wages 121964 .15			4 Social security tax withheld 9330.26				
	121904.1	5			9330.26			
5	Medicare wages and tips			6 Medicare tax withheld				
	120747.81			3501.69				
d	Control number		Dept.	Corp.		Employer use only		
314	16318		150			A 36		
				<u> </u>				
С	Employer's nam							
	Bonill	a, Bro	own and	d Wrigh	t Inc			
	5397 S	haron	Mounta	ains Su	ite 0	09		
	Kaylat	own	NV	12901	-7740			
				Batch		#02021		
b	Employer's FED	ID number	r	a Employee's SSA number				
	04-36781				•	0		
7	Social security t	-		8 Alloca	ted tips			
	121964.1	5				120747.81		
_	Mariffaatiaa Oal	ification Code		10 Dependent core benefits				
9	Verification Code		10 Dependent care benefits 182					
	U					102		
11	Nonqualified plans		12a See instructions for box 12					
	100			12a See instructions for box 12				
				ВВ	I	9570		
14	Other	Other			I	400		
				12c	ı	500		
				12d	I	156		
				13 Stat emp.	Ret. Plan	3rd party sick pay		
				0	x	0		
e/f	Employees name	e, address	and ZIP co	ode				
	Robert Hammond							
	8029 Atkins Square							
	Port M	Melissa	a 8	SD 3804	8-890	3		
45	State	Familian :	etete ID	16 04-4-	wages 45	20.040		
13	I5 State Employers' state ID no. 16 State wages, tips, etc. 89-91-389 62759.66				ps, etc. 62759.66			
	VA	09-31 - 38	J			02/39.00		
17	State income tax 5623.15			18 Local wages, tips, etc.				
				128194.7				
19	Local income to	ax		20 Loca	lity name			
•				•				

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