1	Magaa tina ath			2 Fodor	linaama	tov withhold		
'	1 Wages, tips, other comp.			2 Federal income tax withheld 12950.68				
	/1120./1							
3	Social security wages 55020.5			4 Social security tax withheld				
				4209.07				
5	5 Medicare wages and tips 52069.95			6 Medicare tax withheld 1510.03				
d	Control number		Dept.	Corp.		Employer use only		
	.9779		150	Corp.		A 36		
С	Employer's name	e, address	and ZIP c	ode				
	Mays I	td Inc	2					
	562 Du	dley M	leadow	Suite	804			
	Port R	obert	NC 4	18227-2	984			
				Batch		#02021		
				D ato				
b	Employer's FED ID number			a Employee's SSA number				
	31-32967	35				0		
_	0 11 11 11			0 411				
7	Social security ti	ps		8 Allocated tips				
	35020.5					52069.95		
9	Verification Code		10 Dependent care benefits 173					
	0							
<u></u>								
11	Nonqualified pla	Nonqualified plans		12a See instructions for box 12				
	296			J		9213		
14	Other			12b	<u>'</u> 	219		
1				12c	<u>'</u> 	629		
				12d	i	642		
				13 Stat emp.	Ret. Plan	3rd party sick pay		
				0	x	0		
e/f	Employees name	e, address	and ZIP co	ode				
	Jennif	er T	aylor					
			_	7	77			
		_		Apt. 3				
	Samant	hastad	l NJ	72041-	1951			
15	State	Employers	state ID no	16 84040	wagos #	ne otc		
'3	State TN	42-65-35		. 10 State	wages, ti	ps, etc. 34852.93		
	221	00 00	_			2.002.00		
17	State income tax 1327.68			18 Local wages, tips, etc.				
				49813.46				
42	1 1			00 :	114			
19	Local income ta	ЭX		20 Loca	lity name			

8980.29		Gary Gardens	
Federal Wag	Filing e and Tax	Сору	
W-2 Stater		2018	
Copy B to be filed with employee's Federal	OMB No. 1545-0008		