1	1 Wages, tips, other comp. 182042.65			2 Federal income tax withheld 55164.76			
3	Social security wages 234196.1			4 Social security tax withheld 17916.0			
5	5 Medicare wages and tips			6 Medicare tax withheld			
	147592.92			4280.19			
d 852	Control number 4586		Dept. 150	Corp.		Employer use only A 36	-
С	Employer's name	e, address	and ZIP c	ode			
	Reeves	and S	Sons Gi	roup			
	715 St	ark Fl	Lats Su	ite 25	8		
	Sandra	fort	AL	96550-5043			
				Batch		#02021	
b	Employer's FED 10-28985		r	a Emplo	yee's SSA	number 0	
7	Social security ti	ips		8 Alloca	ted tips		
	234196.1					147592.92	
9	Verification Code 0		10 Dependent care benefits 272				
11	Nonqualified plans		12a See instructions for box 12				
					l	3419	
14	Other			12b		765	
				12c 12d		221 154	
				13 Stat emp.	Pet Plan	3rd party sick pay	
				0	0	X	
e/f	Employees name	e, address	and ZIP co				
	Debra	Ga	arcia				
	1528 Moody Lane Suite 729						
	West James IN 57732-3720						
15	State	Employers'	state ID no	16 State	wages, ti	os, etc.	
	sc	49-95-01				95039.35	
17	State income ta	ıx		18 Loca	l wages, ti	ps, etc.	
	4194.67		223102.04				
19	Local income to	ах		20 Loca	lity name		

29540.5	53			Cheryl Valleys
	Federal	Filing		Сору
	Wage	and	Tax	
W-2	ent		2018	
Copy B to be filed with employee's Federal Income Tax Return OMB No. 1545-0008				