	a Employee's social security number			Safe, Accurate,				_	Visit the IRS Website			
	02	4-81-5988	OMB No	. 1545-00	08 FAST	! Use	e vi	ile)	at www.ii	rs.gov/efile.		
b Employer identification number (EIN)				1 Wages, tips, other compensation				2 Federal income tax withheld				
55-5632407					85634.43				12223.94			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Walters-Mcdonald Inc					97673.5				7472.02			
	496 Sonya Lake				5 Medicare wages and tips				6 Medicare tax withheld			
	_		80244.04				2327.08					
	Lake Michaelfort MN 70582-3809				7 Social security tips				8 Allocated tips			
				97673.5				80244.04				
d Control number				9			10	10 Dependent care benefits				
	7 1								260			
e Employee's first name and initial Last name St				11 Nonqualified plans			12a	12a See instructions for box 12				
	Adam Christensen				289				§ w 2767			
,	64345 Christine Walk Apt. 158 Brendaborough DE 90374-6515			13 Statut emplo	-	ent Third-party sick pay	12b	'	1			
				x			o d e		153			
				14 Other			12c					
210::aa2010ag:- 21 00071 0010							o d	EE	246			
							12d					
							0	AA	981			
f Emplo	yee's address and ZIP code						e		302			
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages,	tips, etc.	19 Local i	ncome tax		20 Locality name		
MN	496-34-605	42296.51	2597.46		87909.2	4	1509	0.81		Collins Route		
IA	471-00-374	41070.92	1655.95		81624.6	4	1627	0.69		Emily Curve		

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					This information is being furnished to the Internal Revenue Service. If you are required						
		02	24-81-5988	OMB N	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.							
b Employer identification number					Wages, tips, other compensation			2 Federal income tax withheld				
55-5632407					85634.43			12223.94				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Walters-Mcdonald Inc					97673.5			7472.02				
496 Sonya Lake					5 Medicare wages and tips			6 Medicare tax withheld				
					80244.04			2327.08				
	Lake Michaelfort MN 70582-3809					7 Social security tips			8 Allocated tips			
					97673.5			80244.04				
d Contro	ol number				9 10 D			10 Depend	pendent care benefits			
	7191049								260			
e Emplo	e Employee's first name and initial Last name Suff.				11 Nonqualified plans			12a See instructions for box 12				
	Adam Christensen 64345 Christine Walk Apt. 158 Brendaborough DE 90374-6515				289 13 Statutory Retirement Third-party			W 2767				
					mployee plan sick pay X Other (see enclosed Notice to Employee)			120	153			
								12c				
								EE	246			
								12d				
								AA	981			
	oyee's address and ZIP cod		AC Ctataaaaa tiaa ata	17 State income tax		140	140	Local income tax		20 1		
15 State	Employer's state ID nu		16 State wages, tips, etc.			18 Local wages, tips, etc.				20 Locality name		
MN	496-34	-605	42296.51	2597.46		87909.24	12	090.81		Collins Route		
IA	471-00	-374	41070.92	1655.95		81624.64	16	270.69		Emily Curve		

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

