a Employee's social security number $019-62-3340$		OMP No	o. 1545-00	Safe, Accurate,	e-file		RS Website		
b Employer identification number (EIN) 76-4920923				Vages, tips, other compensation 237815.51	2 Federal income tax withheld 58277.56				
c Employer's name, address, and ZIP code Davis-Wagner and Sons				ocial security wages		4 Social security tax withheld 20691.47			
9213 Dawn Key Stephensfort HI 02144-1564				Medicare wages and tips 230077.96		6 Medicare tax withheld 6672.26			
	02144-1564			Social security tips 270476.7			77.96		
d Control number			9		10 De	pendent care be	nefits		
e Employee's first name and initial Last name Suff. Mrs. Theresa				lonqualified plans	12a See instructions for box 12 C 3738				
960 Johnson Dale			13 Statur emplo	oyee plan sick pay	12b C o d e	224			
Mariomouth AZ	29364-326	57	14 C	Other	12c C d e R	291			
					12d C o d e L	176			
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 incom	e tax	20 Locality name		
LA 839-84-285	108526.69	8320.07		167891.87	26654.4	<u> </u>	James Island		
NV 534-13-924	121974.99	7914.49		267609.76	40279.8	32	David Light		

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 to file a tax return, a negligence penalty or other sanction may be imposed on you if							
013 02 3340			No. 1545-0008 this income is taxable and you fail to report it.							
b Employer identification number	1 Wages, tips, other compensation			Federal income tax withheld						
76-4920923	237815.51			58277.56						
c Employer's name, address, and ZIP code	3 Social security wages			4 Social security tax withheld						
Davis-Wagner and Sons	270476.7			20691.47						
9213 Dawn Key	5 Medicare wages and tips			6 Medicare tax withheld						
Stephensfort HI 02144-1564			230077.96			6672.26				
			7 Social security tips			8 Allocated tips				
	270476.7			230077.96						
d Control number		9			10 Deper	ndent care b	enefits			
3614000						249				
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 12a See instructions for box 12							
Mrs. Theresa			122			3738				
			tory Retirement Third-party		12b					
960 Johnson Dale			pyee plan sick pay			224				
Mariomouth AZ 29364-32	67	14 (Other (see enclosed Notice to Employee		12c	1				
					R	291				
				-	12d					
					_	100				
				L	L	176				
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.	10 10	cal income ta	<u> </u>	20 Localit	, nama		
			3-1, 1, 1, 1					•		
LA 839-84-285 108526.69	8320.07		167891.87	266	54.4		James	Island		
NV 534-13-924 121974.99	7914.49		267609.76	402	79.82		David	Light		

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

