1	al security number 28-25-0742	OMB No	o. 1545-00		e, Accurate, ST! Use	*e~f	ile		IRS Website rs.gov/efile.		
b Employer identification number (EIN)			1 V	Vages, tips, othe	•	2		l income tax	withheld		
57-2320853			178383.04				35591.94				
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld			
Skinner Ltd and Sons				223746.93				17116.64			
42689 Oliver Valleys				5 Medicare wages and tips				6 Medicare tax withheld			
_				164658.74				4775.1			
Jenniferport NE 34253-2018			7 Social security tips				8 Allocated tips				
	223746.93				164658.74						
d Control number			9			10	Depend	dent care be	enefits		
57								267			
e Employee's first name and initial Last name	е	Suff.	11 N	lonqualified plan	S	12a C	See ins	structions	for box 12		
			201			4110					
Patrick Byrd			13 Statutory Retirement Third-party								
9442 Price Corners	s Suite 367		empl	oyee plan	sick pay	C o d e		732			
Mollyborough MI	52397-6900		14 (Other		12c C					
Morry Dorough Mr 32337 0300						o d	T	292			
						12d					
						C	L	824			
f Employee's address and ZIP code						е		024			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wage	es, tips, etc.	19 Local in	ncome tax	:	20 Locality name		
OK 172-35-530	84157.68	6718.57		223138	•	20061	01		Hudson Land		
	04107.00	0,10.57		223130	-	20001			iidasoii Lalla		
NJ 878-43-618	85307.16	6091.61		130163	.09	34848	3.44		Little Island		

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									
	62	28-25-0742	OMB N	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on yo this income is taxable and you fail to report it.					you if			
b Employer identification number				Wages, tips, other compensation				2 Federal income tax withheld				
57-2320853				178383.04				35591.94				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Skinner Ltd and Sons				223746.93			17116.64					
42689 Oliver Valleys				5 Medicare wages and tips			6 Medicare tax withheld					
Jenniferport NE 34253-2018			164658.74			4775.1						
			7 Social security tips			8 Allocated tips						
				223746.93			164658.74					
d Control number				9			10	Depend	lent care be	enefits		
5730422									267			
e Employee's first name and in	itial Last name	Э	Suff.	11 N	Ionqualified plans		12a	See ins	tructions f	or box 12		
Patrick Byrd 9442 Price Corners Suite 367 Mollyborough MI 52397-6900			201 13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			4110						
						732						
						12c						
							т	292				
						12d						
								-	824			
						-		L	024			
f Employee's address and ZIP 15 State Employer's state I		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal inco	ome tax		20 Locality	name	
	35-530	84157.68	6718.57		223138.94	20	061	01		Hudson		
			10.20.07							11445011		
NJ 878-	43-618	85307.16	6091.61		130163.09	34	848.	44		Little	Island	

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

