_	101 11 11			T				
1	3 , 1 ,			2 Federal income tax withheld 28769.69				
	82506.58							
3	Social socurity w	12000		4 Social	cocurity t	ax withheld		
ľ	Social security wages 97825.28			4 Social	Security t	7483.63		
	97625.26					7403.03		
5	Medicare wages and tips			6 Medicare tax withheld				
	78564.06			2278.36				
d	Control number		Dept.	Corp.		Employer use only		
170	7782		150			A 36		
С	Employer's name	e, address,	and ZIP c	ode				
	Smith-	Morrow	Grou <u>r</u>	Þ				
	627 Mc	connel	.l Pine)				
	Port S	hane	CA 302	278-458	1			
						""		
				Batch		#02021		
b	Employer's FED	ID number	•	a Employee's SSA number				
		3-6680363			, 00 0 00,	0		
7	Social security ti	ps		8 Allocated tips				
	97825.28				78564.06			
9	Verification Code		10 Dependent care benefits					
	0					285		
11	Nonqualified plans		12a See instructions for box 12					
l''	228	1113		12a See II	2d See Instructions for box 12			
	220			EE	ı	9614		
14	Other			12b	<u> </u>	660		
-		Other		12c	<u>'</u>	322		
				12d	i	164		
				13 Stat emp.	Ret. Plan	3rd party sick pay		
				x	x	x		
e/f	Employees name	e, address	and ZIP co	ode				
	Jennifer Beck							
	92502 Perez Trail							
	North	Vaness	astad	VT 2	6592-8	3331		
15	State	Employers'	state ID no	.16 State	wages, tij	os, etc.		
Ĭ .	sc	69-27-05				41837.75		
17	State income tax 5219.14			18 Local wages, tips, etc.				
				85290.09				
					_			
19	Local income ta	ax		20 Loca	lity name			

9426.75				Mcbride Pike
	Federal Wage	Filing and	Tax	Сору
W-2	ent	Ιαλ	2018	
Copy B to be filed with employee's Federal Income Tax Return				OMB No. 1545-0008