a Employee's soci	ial security number	1	Safe, Accurate, Visit the IRS Website					
	37-16-0400	OMB N	o. 1545-00	AFS.	e-f		rs.gov/efile.	
·	37 10 0400	OWID IN					0	
b Employer identification number (EIN)			1 Wages, tips, other compensation			2 Federal income tax withheld		
26-9819949	84406.54			26555.05				
c Employer's name, address, and ZIP code	3 Social security wages			4 Social security tax withheld				
Johnson-Harvey Group	88964.12			6805.76				
5344 Brown Rapids	5 N	Medicare wages and tips	6	6 Medicare tax withheld				
_		86748.62		2515.71				
Kellyton UT 77566-5858				Social security tips	8	8 Allocated tips		
				88964.12		8674	8.62	
d Control number			9		10	Dependent care be	enefits	
88						258		
e Employee's first name and initial Last name	ie	Suff.	11 1	Nonqualified plans	12a	See instructions	for box 12	
				142	0	9169		
Christine Stevenson			13 Statutory Retirement Third-party			12b		
	employee plan sick pay			ĺ				
284 Monica Mission					o d e	s 336		
Jacksonshire NH 23865-9861				Other	12c			
343.133.131.23			0	J 973				
					12d	0 3 / 3		
					c			
					d	s 349		
f Employee's address and ZIP code					C			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Local in	ncome tax	20 Locality name	
AK 735-97-490	40522.36	4163.65		71825.07	11174	1.35	Aaron Gateway	
TX 666-12-134	44218.74	3520.46		87435.07	16712	2.5	Castillo Ports	

Wage and Tax
m w-2 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.

	а	Employee's socia	37-16-0400	OMB N	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 this income is taxable and you fail to report it.					
b Employer identification number 26-9819949				1 Wages, tips, other compensation 84406.54			2 Federal income tax withheld 26555.05			
c Employer's name, address, and ZIP code Johnson-Harvey Group				3 Social security wages 88964.12			4 Social security tax withheld 6805.76			
5344 Brown Rapids Kellyton UT 77566-5858				5 Medicare wages and tips 86748.62 7 Social security tips 88964.12			6 Medicare tax withheld 2515.71 8 Allocated tips 86748.62			
d Contr	88 44 030				9	00301.12		10 Depend	lent care be	
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 142			12a See instructions for box 12 9169				
Christine Stevenson 284 Monica Mission			13 Statutory Retirement Third-party employee plan sick pay			s 336				
Jacksonshire NH 23865-9861				14 Other (see enclosed Notice to Employee)			J 973			
							12d S 349			
f Emplo	oyee's address and ZIP code Employer's state ID numb	er	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income tax		20 Locality name
AK	735-97-		40522.36	4163.65		71825.07		174.35		Aaron Gateway
ТX	666-12-	134	44218.74	3520.46		87435.07	16	712.5		Castillo Ports

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

