· · ·	ial security number 48-70-0521	OMB N	o. 1545-000	Safe, Accura	ate,	→ file		IRS Website irs.gov/efile.		
b Employer identification number (EIN) 67-3573151			1 Wages, tips, other compensation 183017.82			2 Federal income tax withheld 45698.07				
c Employer's name, address, and ZIP code Herrera-Reed Inc				3 Social security wages 227003.94 5 Medicare wages and tips			4 Social security tax withheld 17365.8			
03210 Bethany Greens Garrisonmouth MT 23842-7970				235626.24 ocial security tips		6 Medicare tax withheld 6833.16 8 Allocated tips				
d Control number				227003.94			•	26.24		
27						10 200	183	onomo		
e Employee's first name and initial Last name Rebecca Maxwel.		Suff.	13 Statuto	•	Third-party	C Q e Q	1177			
74641 Christina Lock			employ		sick pay	c o d e	628			
New Kevin IA 22650-3141			14 Other			12c C d P	291			
						12d C d e J	516			
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 income	tax	20 Locality name		
LA 165-63-723	85651.69	6281.02		199219.3	3	4669.7	4	Christine Hill		
ні 799-71-562	94805.01	6306.47		184249.88	3	2551.1	5	Rodriguez Rapids		

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 748-70-0521	OMB No. 15	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			Wages, tips, other compensation			2 Federal income tax withheld			
67-3573151		183017.82			45698.07				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Herrera-Reed Inc			227003.94			17365.8			
03210 Bethany Greens Garrisonmouth MT 23842-7970			5 Medicare wages and tips			6 Medicare tax withheld			
			235626.24			6833.16			
			7 Social security tips			8 Allocated tips			
			227003.94			235626.24			
d Control number					10 Depend	ent care be	nefits		
2739091						183			
e Employee's first name and initial Last name Suff.			11 Nonqualified plans			12a See instructions for box 12			
Rebecca Maxwell			143		Q	1177			
			ory Retirement Third-party yee plan sick pay		12b				
74641 Christina Lock					Z	628			
New Kevin IA 22650-3141			14 Other (see enclosed Notice to Employee)			12c			
					P	291			
				Ī	12d				
					J	516			
f Employee's address and ZIP code				ı	_				
	State income tax		18 Local wages, tips, etc.	19 L	ocal income tax		20 Locality name		
LA 165-63-723 85651.69 62	81.02		199219.3	34	669.74		Christine Hill		
ні 799-71-562 94805.01 63	06.47		184249.88	32	551.15		Rodriguez Rapids		

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

