a Employee's social security nu 167–23–		OMB No.	. 1545-000		e, Accurate, ST! Use	(RSE	v fil		Visit the I			
b Employer identification number (EIN)				1 Wages, tips, other compensation				2 Federal income tax withheld				
20-5765046		203417.02				50205.33						
c Employer's name, address, and ZIP code		3 Social security wages				4 Social security tax withheld						
Strickland-Thomas and Sons	164760.51				12604.18							
885 Norman Circle Apt. 189	5 Medicare wages and tips 172996.73				6 Medicare tax withheld 5016.91							
Alyssastad KY 22694	7 Social security tips				8 Allocated tips							
_	164760.51				172996.73							
d Control number			9				10	Depend	ent care bei	nefits		
4:									150			
e Employee's first name and initial Last name Suff.				11 Nonqualified plans				12a See instructions for box 12				
Cynthia Evans				267  13 Statutory Retirement Third-party				g Y 2702				
Cynchia Evans				ry Retirer ree plan	ment Third- sick p		<b>12b</b> C	i				
36636 Michele Port Suite 212				x		-,	0	M	379			
Meyerborough MA 51030-8867				14 Other								
							C o d e	L 788				
							<b>12d</b>	1				
							ō	N	207			
f Employee's address and ZIP code						1.0						
	3 , - ,	17 State income tax		3 - 7 - 7 - 7			19 Local income tax			20 Locali	•	
KY 891-71-828 10873	4.78 775	58.81		262868	.19	36	056.	. 66		Tina	Falls	
NC 877-02-922 97953	.3 716	67.4		225365	. 45	24	1560.	. 85		Johnson	Causeway	

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 socia	I security number			This information is being furnis	hed to th	he Internal Re	venue Servi	ice. If you a	are required
		16	7-23-8381	OMB No	OMB No. 1545-0008 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				1	Wages, tips, other compensation	iaii to re	2 Federal income tax withheld				
20-5765046					203417.02		50205.33				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Strickland-Thomas and Sons					164760.51		12604.18				
885 Norman Circle Apt. 189				5	Medicare wages and tips		6 Medicare tax withheld				
Alyssastad KY 22694-0347				172996.73		5016.91					
			7 Social security tips			8 Allocated tips					
						164760.51			1729	96.73	3
<b>d</b> Control					9		•	10 Depen	dent care be	enefits	
4	4337592								150		
e Employe	ee's first name and initial	Last name		Suff.	11	Nonqualified plans		12a See in	structions f	for box 12	
Cynthia Evans			267			Y 2702					
			13 Statutory Retirement Third-party employee plan sick pay			12b	i				
36636 Michele Port Suite 212			X			M	379				
Meyerborough MA 51030-8867				14 Other (see enclosed Notice to Employee)			12c				
negeroregii in oroso coo,						L	788				
			1			12d					
								N	207		
,							-	N	207		
15 State	ee's address and ZIP code Employer's state ID nur		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Lo	cal income tax	(	20 Locali	ity name
KY	891-71	-828	108734.78	7758.81		262868.19	360	56.66		Tina	Falls
				·						†	
NC	877-02	-922	97953.3	7167.4		225365.45	245	60.85		Johnson	Causeway

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

