a Employee's social security number 727–27–9030		OMB No	o. 1545-00		e, Accurate, T! Use	e P	file		IRS Websi rs.gov/efile	
b Employer identification number (EIN) 50-8795426				1 Wages, tips, other compensation 153989.97			2 Federal income tax withheld 39532.18			
c Employer's name, address, and ZIP code  Duffy-Everett and Sons				3 Social security wages 115860.05 5 Medicare wages and tips			4 Social security tax withheld 8863.29 6 Medicare tax withheld			
934 Karen Oval Apt. 756 Nolanshire NC 35632-8760				120076.68  7 Social security tips			3482.22 8 Allocated tips			
d Control number			9	115860	.05	10	Depen	1200 dent care be 282	76.68 enefits	
e Employee's first name and initial Last name  Kelsey Copeland		Suff.	11 N	Nonqualified plan  142 tory Retire		12 C o d e	С	5198		
614 Johnson Crest Suite 083 West Jeremyburgh VA 20133-65				byee plan	sick pay	C od e	GG	492		
				14 Other			H d	735		
						C o d	A A	761		
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 wage	s tins etc	19 Loca	income tax	v	20 Locality	name
	L499.19	6441.84	3 - 7 - 7 - 7			29359.25		James		
AZ 189-51-072 82	2778.01	7190.36		127703	. 84	2314	3.66		Evans	Dam

Wage and Tax
orm 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.

a Employee's social security number 727-27-9030	OMP No. 1545 0009 to file a tax return, a ne							
b Employer identification number  50-8795426		this income is taxable and you Wages, tips, other compensation 153989.97		2 Federal income tax withheld				
c Employer's name, address, and ZIP code	3	Social security wages						
	"	115860.05	*	8863.29				
Duffy-Everett and Sons	5	Medicare wages and tips		6 Medicare tax withheld				
934 Karen Oval Apt. 756	3	9 ,						
Nolanshire NC 35632-8760		120076.68		3482.22				
NOTABILITE NO 33032 0700	7	Social security tips	·	8 Allocated tips				
		115860.05	120	120076.68				
d Control number	9	9 10 Dependent care benefits						
966544		282						
e Employee's first name and initial Last name	Suff. 11	11 Nonqualified plans 12a See instructions for box 12						
Kelsey Copeland	13 Stat	142	C 519	0 0-00				
614 Johnson Crest Suite 083		oyee plan sick pay	GG 492					
West Jeremyburgh VA 20133-	65	Other (see enclosed Notice to Employ	ree) 12c					
West seremysurgh vii 20135			н 735					
			12d					
			A 761					
f Employee's address and ZIP code		<del>-</del>						
, , , , , , , , , , , , , , , , , , , ,	tate income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name				
NE 847-53-987 81499.19 644	41.84	174328.46	29359.25	James Isle				
AZ 189-51-072 82778.01 719	90.36	127703.84	23143.66	Evans Dam				

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

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