a Employee's socia	al security number 20-74-9502	OMB No	o. 1545-00	Safe, Acc	413	e ~1	ile		IRS Website rs.gov/efile.	
b Employer identification number (EIN)		<u>'</u>	1 V	Vages, tips, other comp	ensation	2	Federal	I income tax	withheld	
37-3493491			41669.07				11182.93			
c Employer's name, address, and ZIP code			3 Social security wages			4	4 Social security tax withheld			
Collins-Saunders and Sons			53826.13				4117.7			
9652 Scott Groves Apt. 116			5 Medicare wages and tips 34390.45			6	6 Medicare tax withheld 997.32			
Rodriguezmouth NE 70838-1080			7 Social security tips				8 Allocated tips			
			53826.13			•	34390.45			
d Control number			9			10	10 Dependent care benefits			
82							247			
e Employee's first name and initial Last name		Suff.	11 N	lonqualified plans		12 a	See ins	structions f	or box 12	
Stephanie Dawson			293			o d e	BB 1166			
			13 Statu emple	•	Third-party sick pay	12k)	i		
2995 Scott Unions			Спрк	X	X	o d e	A	403		
East Karenfort NE 51736-4276			14 0	Other		120	;			
						o d e		843		
						120 C	i	490		
f Employee's address and ZIP code						е		490		
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	<u> </u>	20 Locality name	
MD 392-79-132	20287.85	1690.44		47322.75		5157	. 83		Joshua Estates	
						†			L	
DE 943-02-332	19979.87	1267.97		34247.05		4720	.53		Moran Course	

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		This information is being furnished to the Internal Revenue Service. If you are required						
720-74-9502	OMB No. 1545	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	2 Federal	I income tax withheld				
37-3493491		41669.07	1118	11182.93				
c Employer's name, address, and ZIP code	3	Social security wages	4 Social s	4 Social security tax withheld				
Collins-Saunders and Sons		53826.13	4117	4117.7				
9652 Scott Groves Apt. 116	5	Medicare wages and tips	6 Medica	Medicare tax withheld				
_		34390.45		997.32				
Rodriguezmouth NE 70838-1080	7	Social security tips	8 Allocate	8 Allocated tips				
		53826.13		34390.45				
d Control number	9		10 Depend	dent care benefits				
8282622				247				
e Employee's first name and initial Last name	Suff. 11	Nonqualified plans	12a See ins	structions for box 12				
Charles Barrer		293	вв	BB 1166				
Stephanie Dawson		ratutory Retirement Third-party nployee plan sick pay	12b	İ				
2995 Scott Unions		x x	A	403				
East Karenfort NE 51736-4276	14	Other (see enclosed Notice to Employ	ee) 12c	i I				
			G	G 843				
			12d					
				490				
f Employee's address and ZIP code								
	ate income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name				
MD 392-79-132 20287.85 169	0.44	47322.75	5157.83	Joshua Estates				
DE 943-02-332 19979.87 126	57.97	34247.05	4720.53	Moran Course				

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

