a Employee's social securit	ity number 5-3078	OMB No	o. 1545-00		e, Accurate, ST! Use	<b>e</b> ~	file		IRS Website rs.gov/efile.		
b Employer identification number (EIN)		•	1 V	Vages, tips, othe	er compensation	2	Federa	al income ta	x withheld		
72-7975122				173418	.31		1895	6.53			
c Employer's name, address, and ZIP code			<b>3</b> S	Social security wa	ages	4	Social	security tax	withheld		
Ford, Sanders and Lawrer	nce Ltd			148385	. 43		1135	1.49			
304 Jackson Meadows Apt. 037				5 Medicare wages and tips				6 Medicare tax withheld			
New Debra CT 39850-3929				170887.56				4955.74			
New Debra CT 39850-	-3929		<b>7</b> S	Social security tip	s	8	Allocat	ted tips			
	148385.43				170887.56						
d Control number			9			10	Depen	dent care b	enefits		
2(								155			
e Employee's first name and initial Last name		Suff.	11 N	lonqualified plan	is	12	a See in	structions	for box 12		
Kimberly Rodriguez				293			C d d d d d d d d d d d d d d d d d d d				
Kimberry Rodriguez	1		13 Status emplo	•	ment Third-party sick pay	12 C	b				
7459 Lee Plains			X	X	SICK PAY	o d e	С	419			
South Zachary AL 76022-0580			14 C	Other		12 C	С				
						o d	M	538			
						12	d				
						C o d e	R	540			
f Employee's address and ZIP code											
	ate wages, tips, etc.	17 State income tax		3, , , .,		19 Local income tax			20 Locality name		
NY 294-68-371 786	569.32	8176.53	127820.25		3156	31565.24		Butler Burg			
RI 803-18-166 889	941.0	6727.5		210700	.01	1955	8.97		Christine Club		

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	l security number			This information is being furnis					
	11	7-65-3078	OMB N	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on you this income is taxable and you fail to report it.						
b Employer identification number			Wages, tips, other compensation			2 Federal income tax withheld				
72-7975122				173418.31			18956.53			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Ford, Sanders and Lawrence Ltd				148385.43			11351.49			
304 Jackson Meadows Apt. 037 New Debra CT 39850-3929			5 Medicare wages and tips			6 Medicare tax withheld				
				170887.56		4955.74				
				7 Social security tips			8 Allocated tips			
					148385.43			1708	87.56	
d Control number			9			<b>10</b> Depe	endent care b	penefits		
2083455								155		
e Employee's first name and initial Last name Suff.  Kimberly Rodriguez			11 Nonqualified plans  293  13 Statutory Retirement Third-party employee plan sick pay			12a See instructions for box 12				
						D 4204				
7459 Lee	Plains			X			С	419		
South Zachary AL 76022-0580			14 Other (see enclosed Notice to Employee)			12c				
						М	538			
						12d				
							R	540		
f Employee's address and ZI	P code					Н		10.10		
5 State Employer's state		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Lo	ocal income	ax	20 Locality name	
NY 294-	-68-371	78669.32	8176.53		127820.25	315	565.24	l .	Butler Bur	
RI 803-	-18-166	88941.0	6727.5		210700.01	195	558.97	7	Christine Clu	

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

