e Employee's first name and initial Last name Suff. Crystal Myers			11 Nonqualified plans 198			C o d e	12a See instructions for box 12 C DD 9263		
0950 Brendan Club Apt. 504			13 Statu emple		Third-party sick pay	1 C o d e		200	
New Dennisburgh UT 67773-3783			14 0	Other		O d e	В	455	
						1 C o d		464	
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, ti	os, etc.	19 Loc	al income tax	x	20 Locality name
' '	•								
NE 234-14-291	49143.44	3790.88		94348.89		116	37.44		Christian Prairie
NC 812-86-924	44534.55	5563.56		109322.4		127	07.48		Joanna Wells

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 require							
	183-58-4573	3 OMB N	lo. 1545-0	to file a tax return, a negligen this income is taxable and yo			ction may b	e imposed on you if		
b Employer identification number				Wages, tips, other compensation			2 Federal income tax withheld			
12-0493907				93193.42			24407.6			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Cross-White PLC				90514.1			6924.33			
5773 Floyd Path Suite 675			5 Medicare wages and tips			6 Medicare tax withheld				
South Paulland WY 66041-5926			119201.27			3456.84				
			7 Social security tips			8 Allocated tips				
				90514.1			119201.27			
d Control number			9			10 Depend	lent care b	enefits		
5594989			171							
e Employee's first name and initial Last name Suff.			11 Nonqualified plans			12a See instructions for box 12				
				198		DD	9263			
Crystal Myers				13 Statutory Retirement Third-party			12b			
0950 Brendan Club Apt. 504			employee plan sick pay			BB	200			
-				14 Other (see enclosed Notice to Employee)			l			
New Dennisburgh UT 67773-3783						В	455			
					ŀ	12d	455			
							l _			
							S 464			
f Employee's address and ZIP coo		os. etc. 17 State income tax		18 Local wages, tips, etc.	10 1	ocal income tax		20 Locality name		
' '	9			9						
NE 234-14	1-291 49143.44	3790.88		94348.89	111	637.44		Christian Prairie		
NC 812-86	5-924 44534.55	5563.56	6 109322.4 12707.48		Joanna Wells					

Wage and Tax
rm w-2 Statement

2019

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