1 Wages, tips, other comp.			2 Federal income tax withheld				
	233146.9					73449.38	
3	Social security wages 208770.54			4 Social security tax withheld 15970.95			
5	5 Medicare wages and tips			6 Medicare tax withheld			
	218793.7	9				6345.02	
<b>d</b> 555	Control number 9328		Dept. 150	Corp.		Employer use of A 3	nly <b>6</b>
С	Employer's name						
	Schnei	.der, M	Martin	and Ja	ckson	LLC	
	31990	Clark	Corner	2			
	Lake J	Jennife	rfort	WI	56	526-3457	
				Batch		#02021	
b	Employer's FED 94-39809		•	a Emplo	yee's SSA	number 0	
7	Social security t	-		8 Alloca	ted tips		
	208770.5	4				218793.79	
9	Verification Code 0		10 Dependent care benefits 123				
11	Nonqualified plans		12a See instructions for box 12				
<u> </u>				G	l	5798	
14	Other			12b 12c	<u> </u>	679	
				12d		<b>684</b> 327	
				13 Stat emp.	Ret. Plan	3rd party sick pay	
				x	0	0	
e/f	Employees name			ode			
	Thomas		loody				
	3214 Brown Garden Elizabethview NV 26338-9877						
15	State NE	Employers' 69-76-80	state ID no	.16 State	wages, ti	os, etc. 106270.46	
17	State income tax 13531.38		18 Local wages, tips, etc. 209661.86				
19	Local income to	ax		20 Loca	lity name		

26740.62			Hardy Corners
Federal Wage	Filing and	Tax	Сору
W-2 Statement	ent		2018
Copy B to be filed with employee's Federal In	come Tax R	eturn	OMB No. 1545-0008