_								
1	1 Wages, tips, other comp. 68929.55			2 Federal income tax withheld 17242.92				
3	Conint annuity was			4 Social	00011111111	av withhald		
3	S Social security wages 68204.12			4 Social	security t	ax withheld 5217.62		
	00204.12					3217.62		
5	5 Medicare wages and tips			6 Medicare tax withheld				
	85943.88			2492.37				
d	Control number		Dept.	Corp.		Employer use only		
577	3723		150			A 36		
c	Employer's name	addrass	and ZID a					
ا				oue				
	Jackso	_						
	830 Ma	rtinez	Coves	3				
	West A	mystac	l ID	93213-4921				
		-						
				Batch		#02021		
				Daten		#02021		
b	Employer's FED ID number			a Employee's SSA number				
	62-8200605				,	0		
7	Social security ti	ps		8 Alloca	ted tips			
	68204.12					85943.88		
	Mariffe of the Oak			40 Panandant assa kanafita				
9	Verification Code 0		10 Dependent care benefits 228					
11	Nongualified pla	Nonqualified plans		12a See instructions for box 12				
	200							
				FF	I	3884		
14	Other					502		
				12c	l	352		
				12d	l			
				13 Stat emp.		3rd party sick pay		
215	Employees		and 710	0	0	0		
e/f	Employees name	, audress	anu ZIP CC	ue				
	John Lester							
	4048 V	incent	Exter	nsions				
	Lake J	oseph	NM 1	13569-8	201			
		•						
15	State Employers' state ID no.16			.16 State	6 State wages, tips, etc.			
	WI	78-63-70	4			31083.82		
17	State income tax			18 Local wages, tips, etc.				
	2215.57			84240.35				
19	Local income ta	ν		20 Loca	lity name			
113	Local Income la	ı n		IZU LUCA	iity Hallie			

13154.9		Zhang Ridges
Federal Wag	Filing ge and Tax	Сору
W-2 State	ment	2018
Copy B to be filed with employee's Federa	al Income Tax Return	OMB No. 1545-0008