2222 Void a Employee's social security no	1			
b Employer identification number (EIN)	OMB No. 154	5-0008	Like	
` '		1 Wages, tips, other compensation	2 Federal in	come tax withheld
870300600 c Employer's name, address, and ZIP code		20, 109, 25	51	913.15
		3 Social security wages	4 Social sec	curity tax withheld
1 2571 MEST 2500 SOUTH		20,109.25	5	844 59
REDMAN VAN & STORAGE 2571 WEST 2590 SOUTH SALT LAKE CITY, UT 84119		5 Medicare wages and tips	6 Medicare	tax withheld
3/121 EARL CITT, UT 04119		20 109 25 7 Social security tips		291.58
		2 Coolar security tips	8 Allocated	tips
d Control number		9	10 Depender	nt care benefits
80	,		76 Depender	it care beliefits
e Employee's name, address, city, and ZIP code		11 Nonqualified plans	12a See instri	uctions for box 12
MUAGUTUTIA SALE			Coo	
1000 FAIRWOOD DD #00		13 Statutory Retirement Third-party employee plan sick pay	12b	
1968 FAIRWOOD DR #20 WEST VALLEY CITY, UT 84118			od e	
		14 Other	12c	
			å	
			12d ≎	
			d e	
15 State Employer's state ID number 16 State wages, tips,	, etc. 17 State incom-	e tax 18 Local wages, tips, etc.	19 Local income t	ax 20 Locality name
UT 12289446004WTH 20 109	25 590			20 Locality name
1	20-1			
W-2 Wage and Tax Statement	ר וחכ	Department o	f the Treasury – In	ternal Revenue Service
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Copy 1—For State, City, or Local Tax Department Copy D—For Employer.			Act Notice	, see back of Copy D.
oop, be not employer.		LW2D1		5204