The state of the s					
2222 Void 517-15-8509	OMB No. 154	5-0008			
b Employer identification number (EIN)			ges, tips, other compensation	2 Federal	income tax withheld
870300600			6.174.91		626.23
c Employer's name, address, and ZIP code			cial security wages	4 Social s	ecurity tax withheld
REDMAN VAN & STORAGE			6.174.91		259.35
2571 WEST 2590 SOUTH SALT LAKE CITY, UT 84119			5 Medicare wages and tips		e tax withheld
SALT LAKE CITY, UT 84119			6.174.91		89.54
			7 Social security tips		ed tips
d Control number				10 Depend	ent care benefits
45					
e Employee's name, address, city, and ZIP code			nqualified plans	12a See ins	tructions for box 12
BRADEN JONES				Coa	
DI II DEIT		13 State		12b	
3108 RIVER ROAD			loyee plan sick pay	c	
3108 RIVER ROAD LAUREL, MT 59044			er	12c	
				12d	
				S	
				d e	
15 State Employer's state ID number 16 State wages, tips, etc.	17 State incom	L	40 1		
To State wages, tips, etc.			18 Local wages, tips, etc.	9 Local incom	e tax 20 Locality name
MT 736822 6.174.91	J 321	80			

Wage and Tax Statement

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Department of the Treasury – Internal Revenue Service

For Privacy Act and Paperwork Reduction
Act Notice, see back of Copy D.

Copy 1—For State, City, or Local Tax Department Copy D—For Employer.