

|                                                                                                                      |  |                                        |  |                                                                                                                                       |  |                                          |  |
|----------------------------------------------------------------------------------------------------------------------|--|----------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------|--|
| 22222                                                                                                                |  | Void <input type="checkbox"/>          |  | a Employee's social security number<br>575-98-3457                                                                                    |  | OMB No. 1545-0008                        |  |
| b Employer identification number (EIN)<br>870300600                                                                  |  |                                        |  | 1 Wages, tips, other compensation<br>5,044.77                                                                                         |  | 2 Federal income tax withheld<br>325.26  |  |
| c Employer's name, address, and ZIP code<br>REDMAN VAN & STORAGE<br>2571 WEST 2590 SOUTH<br>SALT LAKE CITY, UT 84119 |  |                                        |  | 3 Social security wages<br>5,044.77                                                                                                   |  | 4 Social security tax withheld<br>211.88 |  |
|                                                                                                                      |  |                                        |  | 5 Medicare wages and tips<br>5,044.77                                                                                                 |  | 6 Medicare tax withheld<br>73.15         |  |
|                                                                                                                      |  |                                        |  | 7 Social security tips                                                                                                                |  | 8 Allocated tips                         |  |
| d Control number<br>47                                                                                               |  |                                        |  | 9                                                                                                                                     |  | 10 Dependent care benefits               |  |
| e Employee's name, address, city, and ZIP code<br>DEREK L. KNOWLES<br>480 W 1425 N APT T<br>LAYTON, UT 84041         |  |                                        |  | 11 Nonqualified plans                                                                                                                 |  | 12a See instructions for box 12          |  |
|                                                                                                                      |  |                                        |  | 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> |  | 12b                                      |  |
|                                                                                                                      |  |                                        |  | 14 Other                                                                                                                              |  | 12c                                      |  |
|                                                                                                                      |  |                                        |  |                                                                                                                                       |  | 12d                                      |  |
| 15 State Employer's state ID number<br>UT   12289446004WTH                                                           |  | 16 State wages, tips, etc.<br>5,044.77 |  | 17 State income tax<br>178.79                                                                                                         |  | 18 Local wages, tips, etc.               |  |
|                                                                                                                      |  |                                        |  |                                                                                                                                       |  | 19 Local income tax                      |  |
|                                                                                                                      |  |                                        |  |                                                                                                                                       |  | 20 Locality name                         |  |

Form **W-2** Wage and Tax Statement

**2011**

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.