a Employee's social security no. 102-11-0029		Copy B To Be Filed With Employee's OMB No. 1545-0008 FEDERAL Tax Return						
b Employer identification number (EIN)			1 Wage	es, tips, other compensation	2 Federal ir	2 Federal income tax withheld		
13-3249958			385000.00 102255.				02255.00	
c Employer's name, address, and ZIP code			3 Socia	I security wages	4 Social sec	4 Social security tax withheld		
INTEGRATED DATA MANAGEMENT SYSTEMS				90900.00	7960.80			
ACCOUNT ABILITY COMPLI	ANCE SOFTWARE		5 Medi	care wages and tips	d tips 6 Medicare tax withheld			
555 BROADHOLLOW ROAD SUITE 273				400000.00		7600.00		
MELVILLE NY 11747-5001			7 Social security tips		8 Allocated	8 Allocated tips		
				37500.00		32000.00		
d Control number			9 Verification code		10 Dependent care benefits			
D923442842			FF30-93DD-432A-CC23		9750.00			
e Employee's first name, middle initial, last name and suffix			11 Nonqualified plans		12a See ir	12a See instructions for box 12		
					S	:	15000.00	
JOHN M DOE JR				tutory Retirement Third-party	12b			
33 EAST 17 STREET APT 2101			GII	X	v	!	52500.00	
NEW YORK NY 10003-2005			14 Other		12c			
			AUTO 4245.34 NYSD 31.20		DD		9340.00	
					12d	12d		
			ME	ALS 1750.00	нн	:	15000.00	
f Employee's address and ZIP code								
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income	tax	18 Local wages, tips, etc.	19 Local incom	19 Local income tax 20 Locality		
NY 133249958	325000.00	6350	00.00 300000.00 19		197	50.00	NYC	
NJ 133249958001	60000.00	875	0.00					

Form W-2 Wage and Tax Statement 2018

Department of the Treasury - Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

a Employee's social security no. 102-11-0029		OMB No. 1545-0008	Copy C For EMPLOYEE'S RECORDS.						
b Employer identification number (EIN)			1 Wage	s, tips, other compensation	2 Federal i	2 Federal income tax withheld			
13-3249958				385000.00	385000.00 102255.00				
c Employer's name, address, and ZIP code			3 Social security wages 4 Social security tax withheld			hheld			
INTEGRATED DATA MANAGEMENT SYSTEMS				90900.00 7960.			7960.80		
ACCOUNT ABILITY COMPLIANCE SOFTWARE			5 Medio	care wages and tips	6 Medicare tax withheld				
555 BROADHOLLOW ROAD SUITE 273				400000.00 7600			7600.00		
MELVILLE NY 11747-5001			7 Social security tips		8 Allocated	8 Allocated tips			
		37500.00			32000.00				
d Control number			9 Verification code		10 Depende	10 Dependent care benefits			
D923442842			FF30-93DD-432A-CC23		3	9750.00			
e Employee's first name, middle initial, last name and suffix			11 Nonqualified plans		12a See i	12a See instructions for box 12			
					s		15000.00		
JOHN M DOE JR			13 Sta	tutory Retirement Third-party ployee plan sick pay	12b				
33 EAST 17 STREET APT 2101			Citi	X	v		52500.00		
NEW YORK NY 10003-2005	5		14 Other		12c	1			
			AUTO 4245.34		DD		9340.00		
			NYSD 31.20		12d	12d			
			MEZ	ALS 1750.00	HH		15000.00		
f Employee's address and ZIP code						·I			
5 State Employer's state ID number	16 State wages, tips, etc.	17 State income t	tax 18 Local wages, tips, etc.		19 Local inco	me tax	20 Locality nam		
NY 133249958	325000.00	63500	0.00	300000.00	197	50.00	NYC		
NJ 133249958001	60000.00	8750	0.00						