

OMB# 1545-0008

COPY 2 - To Be Filed With
Employee's State, City, or
Local Income Tax Return

1 Wages, tips, other compensation 2951.41	2 Federal income tax withheld 3.61
3 Social security wages 2951.41	4 Social security tax withheld 182.99
5 Medicare wages and tips 2951.41	6 Medicare tax withheld 42.80

a Employee's social security number
669-30-1405

c Employer's name, address, and ZIP code
CALICOON CREAMERY LLC
PO BOX 15
4623 STATE ROUTE 17B
CALICOON NY 12723

e Employee's name
HENRY SIMON
71 TONJES ROAD
CALICOON NY 12723

f Employee's address and ZIP code	9	12a	\$
b Employer identification number (EIN) 81-1371684	10 Dependent care benefits	12b	\$
7 Social security tips	11 Nonqualified plans	12c	\$
8 Allocated tips	14 Other	12d	\$
13 Statutory employee plan	12e	12e	\$
15 State NY	Employer's state ID number 811371684	16 State wages, tips, etc. 2951.41	17 State income tax 26.99
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement **2021** Department of the Treasury-Internal Revenue Service
669301405000190482

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Employee's State, City, or
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CALICOON NY 12723

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71 TONJES ROAD
CALICOON NY 12723

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18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement **2021** Department of the Treasury-Internal Revenue Service

OMB# 1545-0008

COPY B - To Be Filed With
Employee's FEDERAL Tax Return.
This information is being furnished to
the Internal Revenue Service.

1 Wages, tips, other compensation 2951.41	2 Federal income tax withheld 3.61
3 Social security wages 2951.41	4 Social security tax withheld 182.99
5 Medicare wages and tips 2951.41	6 Medicare tax withheld 42.80

c Employer's name, address, and ZIP code
CALICOON CREAMERY LLC
PO BOX 15
4623 STATE ROUTE 17B
CALICOON NY 12723

e Employee's name
HENRY SIMON
71 TONJES ROAD
CALICOON NY 12723

f Employee's address and ZIP code	9	12a See instructions for box 12	\$
b Employer identification number (EIN) 81-1371684	10 Dependent care benefits	12b	\$
7 Social security tips	11 Nonqualified plans	12c	\$
8 Allocated tips	14 Other	12d	\$
13 Statutory employee plan	12e	12e	\$
15 State NY	Employer's state ID number 811371684	16 State wages, tips, etc. 2951.41	17 State income tax 26.99
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement **2021** Department of the Treasury-Internal Revenue Service
HENRY

OMB# 1545-0008

**COPY C - For EMPLOYEE'S
RECORDS (See Notice to Employee
on the back of Copy B.)**

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if the income is taxable and you fail to report it.

1 Wages, tips, other compensation 2951.41	2 Federal income tax withheld 3.61
3 Social security wages 2951.41	4 Social security tax withheld 182.99
5 Medicare wages and tips 2951.41	6 Medicare tax withheld 42.80

e Employee's name
HENRY SIMON
71 TONJES ROAD
CALICOON NY 12723

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b Employer identification number (EIN) 81-1371684	10 Dependent care benefits	12b	\$
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18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement **2021** Department of the Treasury-Internal Revenue Service