

DATE: 11/10/11  
 TIME: 10:10:15  
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**1. From USPCON.**  
 Default is supplied,  
 must be in this format

**2. User entered, year**  
 that will be supplied  
 to all agencies as  
 submission year

FINAL REPORT FOR W-2 FORMS  
 FOR CALENDER YEAR 2019  
 TOTALS FOR ALL EMPLOYEES  
 SORTED BY EMPLOYEE NAME

SAMPLE LOCAL SCHOOLS  
 PO BOX 1555  
 SAMPLEVILLE, OH 44444

FEDERAL ID NUMBER: 34-6464646

STATE ID NUMBER: 51-333333

CONTROL NUMBER	SSN	EMPLOYEE NAME	TAX WITHHELD	TAXABLE GROSS	TOTAL GROSS	ANNUITIES
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0000297 \*\* REPORT TOTALS

CONTROL NUMBER	SSN	EMPLOYEE NAME	TAX WITHHELD	TAXABLE GROSS	TOTAL GROSS	ANNUITIES
001		FED TAX	291	618,807.50	5,085,756.21	5,840,950.63
		INSURANCE		315.99		
		MEDICARE PICKUP		1,959.29		
		403 (B)		97,913.90		
		457		7,440.00		
		SECTION 125		118,321.88		
002		ST. TAX	291	185,765.11	5,085,109.03	5,840,303.45
301		MILBTX	28	8,920.28	567,040.01	573,919.81
302		WALBTX	34	13,463.98	932,021.31	948,653.62
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328		BRYAN	1	366.39	24,429.79	24,653.79
329		SWANTON	1	82.57	6,606.88	6,904.38
800		8708 - PERRY	23	3,008.30	603,076.31	687,721.93
801		2003 - DEF	1	276.30	55,254.22	62,163.15
802		8701 - B G	14	1,028.67	205,240.70	239,362.32
803		7202-FRE	1	447.39	35,744.76	39,623.71
807		8703-ELMWOOD	1	284.62	23,081.57	26,019.58
808		8708 - OTSEG	3	2.80	220.50	245.00
809		7406-SENECA	1	281.80	27,902.33	31,994.32
		MEDICARE	208	51,107.59	3,524,576.92	3,595,927.03

**3. Extra amounts that**  
 need to be placed on  
 W2 will be in this area

**4. Descriptions from**  
 DEDNAM, First 6  
 characters will print in  
 boxes on W2

TOTAL NUMBER OF W2 FORMS TO BE PRINTED: 291

**5. From tax records**  
 as found in  
 DEDSCN

**6. Calculated**  
 value: Total  
 gross minus  
 taxable gross