IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLORADO

Civil Action No. 23-cr-00074-NYW-1

UNITED STATES OF AMERICA,

v.

DEJANE REANIECE LATTANY, Movant/Defendant.

MOTION TO VACATE, SET ASIDE, OR CORRECT SENTENCE PURSUANT TO 28 U.S.C. § 2255

NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

A. MOVANT/DEFENDANT INFORMATION

You must notify the court of any changes to your address where case-related papers may be served by filing a notice of change of address. Failure to keep a current address on file with the court may result in dismissal of your case.

DEJANE REANIECE LATTANY, 11125 Quintero Court Commerce City Colorado 80022
(Movant/Defendant's name, prisoner identification number, and complete mailing address)

Indicate whether you are a prisoner or other confined person as follows: (check one)

x Convicted and sentenced federal prisoner
___ Other: (*Please explain*) _____

B. CONVICTION UNDER ATTACK

Name of the court that entered the judgment of conviction:	UNITED STATES DISTRICT COURT
Date the conviction was entered:	August 15, 2023
Case number:	1:23-cr-00074-NYW-1
Length and type of sentence:	48 Months in Federal Prison
Are you serving any other sentence?	___ Yes X _ No (*check one*)
Offense(s) you were convicted of committing:	Wire Fraud
What was your plea?	Guilty
Kind of trial:	N/A_____ Jury _ Judge only (*check one*)

C. DIRECT APPEAL

Did you file a direct appeal?	___ Yes X _ No (*check one*)
Date and result of direct appeal:	_____
Did you seek review in the United States Supreme Court?	___ Yes X _ No (*check one*)
Date and result of review in the United States Supreme Court:	_____
If you did not file a direct appeal, explain why:	_____
List the claims raised:	_____

D. POSTCONVICTION PROCEEDINGS

Have you initiated any other postconviction proceedings with respect to the judgment under attack in this motion? ___ Yes X ___ No (*check one*)

If the instant motion to vacate is a second or successive motion, have you obtained authorization from the United States Court of Appeals for the Tenth Circuit for this court to consider the motion? ___ Yes N / A ___ No (*check one*)

Complete this section of the form if you have filed prior postconviction proceedings with respect to the judgment under attack in this motion. If you have initiated more than one prior proceeding, use additional paper to provide the requested information for each prior proceeding. Please indicate that additional paper is attached and label the additional pages regarding prior proceedings as "D. POSTCONVICTION PROCEEDINGS."

Name and location of court: _____

Type of proceeding: _____

Date filed: _____

Date and result: _____

Did you appeal? ___ Yes ___ No (*check one*)

Date and result on appeal: _____

E. STATEMENT OF CLAIMS

State clearly and concisely every claim you are asserting in this action. For each claim, specify the right that allegedly has been violated and all facts that support your claim. If additional space is needed to describe any claim or to assert additional claims, use extra paper to continue that claim or to assert the additional claims. Please indicate that additional paper is attached and label the additional pages regarding the statement of claims as "E. STATEMENT OF CLAIMS."

WARNING: If you fail to assert all of your claims in this motion, you may be barred from presenting additional claims at a later date.

I ask that the Honorable Court take note that I am aware that this motion is for the Federal case only. The emphasis on the State Case is only to provide details that explain my former Attorney's ineffectiveness that led to the outcome in the Federal

case sentencing. My former attorney Jason Flores Williams made promises and advised me on the law. Jason Flores William's promises and advisement of the law turned out to be untrue and resulted in me having a higher criminal history score and now being safety valve ineligible. In addition, my emphasis on the state case is to inform the Federal court that I will be filing the proper appeal (2254) on the State case that is currently wrapped up in this Federal case. By no means am I trying to over-highlight the state case in this motion.

1. **Violation of Brady v. Maryland**: The prosecution failed to disclose exculpatory evidence in violation of Brady v. Maryland, 373 U.S. 83 (1963), particularly an email from the state accountant indicating that funds were owed to Petitioner, which is material to her defense and could have changed the outcome of the proceedings. In addition, line by line analysis of records was requested and not provided after being requested by the former attorney.

2. The protection of my rights was violated as I was made to understand by my former counsel, Jason Flores Williams, that my state and federal cases would be treated as one and the same, not as separate offenses leading to enhanced sentencing. The former attorney has given me bad advice which led me to a state court conviction and a higher criminal history score.

3. **Ineffective Assistance of Counsel**: My Sixth Amendment right to effective assistance of counsel was violated by Jason Flores Williams' actions and omissions, which include but are not limited to: a. Coercing me to accept a plea deal against my wishes and best interest. b. Failing to adequately communicate, prepare, and represent me during critical junctures of my case before the change of plea in my Federal case. My former attorney was not present during my presentencing report Interview, nor did he prepare me for the presentencing report interview. The former attorney did not inform me nor prepare me for the change of plea. c. Misinforming the me about legal concepts and potential outcomes, leading to uninformed and detrimental decisions. d. Neglecting to challenge prosecutorial mischaracterizations and errors during proceedings, leading to enhanced sentencing.

Ineffective assistance of counsel
1.That counsel's performance was deficient, which means that the representation fell below an objective standard of reasonableness; and
2.That the deficient performance prejudiced the defense, meaning there is a reasonable probability that, but for counsel's unprofessional errors, the result of the proceeding would have been different.

- Jason Flores Williams (former attorney) failed to inform me of the correct information about all plea agreements and made decisions and filed paperwork without consulting me. Filed sentencing memorandum and other documents without consulting me.

-Jason Flores Williams (Former attorney) did not Protect my right to appeal.

-Jason Flores Williams (Former attorney) failed to Object to inadmissible and prejudicial evidence.

-Jason Flores Williams (Former attorney) did not Assert appropriate defenses before and during the change of plea and on sentence date of August 15th, 2023

Supporting facts:

1. Brady v. Maryland (Evidence favorable to the accused was suppressed by the government):

- The email from the state accountant indicating they owe me funds.
- The evidence from the SBA (Small Business Administration) showing the origin of the funds that were claimed to have been stolen.
- The Accountant and Medicaid's email showing the state owed the accused money for services provided, contrary to the claim of Medicaid fraud.
- The Attorney General’s office has conflicting statements from employees and clients.
- Proof from the payroll provider that demonstrates NOT ALL Federal loans taken were fraudulent.

2. Ineffective Assistance of Counsel

- The attorney, Jason Flores Williams, promised that signing the plea agreement for the state of Colorado would mean the federal judge would take "complete Jurisdiction" of the state case, making it as if the state case didn't exist.
- The attorney stated that if the cases were viewed separately, it would be "double jeopardy."
- After providing the state with the business account information (instructed to do so by Former attorney), the state Attorney General incorrectly used that balance to claim theft from Medicaid. The money is from the SBA paycheck protection program, not Medicaid funds.
- Former Attorney Jason Flores Williams gave me bad advice that led to having a State Conviction and a higher criminal history score.

3. Ineffective Assistance of Counsel (Deficient performance by the counsel and prejudice resulted from it):

- Jason Flores Williams strongly suggested me not read the plea agreement, He only summarized it, and assured me of the outcomes.
- I was made to believe that by signing the plea, the federal judge would not see my history as that of a criminal.
- Despite promises, I ended up in a higher criminal category during sentencing.
- Jason Flores Williams did not defend or explain discrepancies during or before the change of plea or at the time sentencing.
- I was not properly prepared for the presentencing report interview with the probation officer Sara Johnson, and the attorney did not attend this with me.
- Jason Flores Williams did not prepare me for the change of plea and told me just “to be strong and agree with everything the judge asked”. He told me if I had questions to ask him after but never answered my questions.
- Lack of communication as evidence by Exhibit A showing the gaps in communication.
- I was made to sign that I was satisfied with services before discovering the misrepresentation and ineffective counsel on the date of sentencing.
- I was not provided with essential documents before the change of plea or sentencing, such as the Pre-Sentence Report, Sentencing Memorandum, and others.
- I was convinced to give up information on an unrelated business account, which was then wrongly used against me.
- Exhibit B shows the attorney's awareness of potential errors being used against the accused and still allowing them.
- After receiving crucial evidence (email) that could prove the accused's innocence, the attorney did not care to look at the email.
- Jason Flores Williams did not provide me with me presentence report or any other case paperwork filed until after sentencing took place.

In conclusion, the information provided show of the former attorney Jason Flores Williams not only failed to provide effective counsel but may have actively misled and misadvised me. The points raised touch upon significant potential violations of my rights, from suppression of exculpatory evidence to instances of being charged and responsible for restitution of the same money twice and highly ineffective legal representation.

Defendant's Statement: In the afternoon of April 26th 2023, I called Jason flores Williams (Former attorney) to discuss the case and the plea-bargain for the State Medicaid case. I told him I did not want to take the plea-agreement because they are making me responsible for over 300,000 dollars restitution and a crime that I did not do. I told him that I did not do that and the reason I did not have the paperwork to prove it was because of covid 19. I was willing to subpoena all of the employees and clients that I could to attest the truth. I told him that I wanted to fight this state case because he had already told me the statute was if I fraudulently took over 100,000 dollars. I know I wasn't taking anything fraudulently. I struggled to be paid by Medicaid and I had to take out so many cash advance loans and use my own money to make the bi weekly payrolls. This is what led to me seeking covid assistance. Judge Torrington did not accept the state's plea agreement paperwork that I was told to sign because it was missing paperwork, which is why it took them 3 different plea agreements to get it set in stone. I knew I could win but my former attorney Jason Flores Williams scared me out of fighting while I was mentally exhausted. (**See Exhibit B)** showing some evidence that Attorney Jason Flores Williams understood that I knew I was not guilty of the state charges and that taking a plea agreement was not the best option for me). If I did not sign the plea agreement based off the promises of my attorney, for the state case, the points and criminal category of my entire sentence would have yielded a different result).

I had Jason on speaker phone with my grandmother and my children's father present. I told him I wanted to fight the case because I didn't do it and the federal judge would look at it as if I have history of being a criminal. He said if I don't sign the plea agreement that I "would risk going to state prison even if I overbilled by 2 dollars, they could get me for cybercrime". I said I wanted them to prove I stole that money line by line and I can prove that I didn't by the financial statements from Medicaid and my bank statements that showed I was upside down every month until I got help from the SBA and cash advances (selling of future profits). He said I need to sign the plea agreement or else I would go to a state prison that I didn't belong to. The day I went to sign the plea agreement as I was instructed, I didn't read it as he strongly suggested, Jason Flores Williams summarized it and told me that the Federal Judge wouldn't look at it as a separate crime and I would serve them concurrently and it would be looked at as the same crime done at the same time. Jason Flores Williams said if they looked at them separately, it would be considered a "double Jeopardy". He said that the federal judge would take "complete Jurisdiction" of the state case and "it would be like the state case is not there anymore". Jason Flores Williams convinced me that this would be the easiest way and later I would be able to go in and later see the that the Federal Government would show that the money belonged to the SBA. (THIS IS THE ONLY REASON I SIGNED THE PLEA AGREEMENT)

My grandmother and my children's father were both hearing this conversation and chimed in. They didn't agree with him that I should be responsible for something that big that I didn't do. He told me " I hear people in the background, and I need you to take me off of speaker phone, I know what I am talking about". (statements and affidavits can be submitted upon request of the court)

Several times, my previous attorney taught me how to reply to the judge that I agree with everything and even if I didn't understand to stand firm and say that I understand and agree, or I could jeopardize being out on bond. As a result, I was afraid to say if I didn't understand something.

May 18th, 2023, I went and signed the 3rd revised plea agreement and at that time he went through and summarized quickly and initialed for me on each page. On the last page, I signed my signature. This happened each time I signed the plea agreements.

May 18th, 2023, was the last time I spoke to him about my case. He didn't even prepare me for the presentencing report with the probation officer (I believe was on June 2nd, 2023), nor did he show up with me. He didn't even help me or discuss. with the letters or for speaking to the judge or due dates or when things were filed against me or when he filed on my behalf.

Today, I have an email from the state accountant stating that they need to send me funds that I am owed. I asked for that to be inserted into evidence along with a statement considering re-opening the state case. I was promised by my previous attorney Jason Flores Williams that the state of Colorado would not be able to claim the restitution of money that belonged to the federal government. There is clear evidence that the money that the state of Colorado Medicaid is claiming was wired in by the SBA and did not belong to the state of Colorado. This was another reason why I was against signing the plea agreement for the state of Colorado. However, my former attorney Jason Flores Williams made promises and stated that I would not need to worry about it and the state would need to fight the Federal Government for the funds and that it would be out of my hands. However, because I listened to my former attorney Jason Flores Williams, I am now responsible for double funds that I did not take. In addition, I am being sentenced as a former criminal in category 2. My Former attorney Jason Flores Williams was ineffective with having me plead guilty to the State case. In his ineffectiveness he caused me to Plead guilty for the state charges before pleading guilty to the Federal charges causing me to be in a higher criminal history category 2 instead of 1. With his advice, I did not go to trial with the state as I desired. Because of this, I am now also Safety Valve ineligible. With the proper guidance and efforts of my previous attorney, I would still be a first-time offender according to the Federal Guidelines and not responsible for a crime that I did not commit.

Also, up until September 27th, 2022, We were going to challenge portions the federal case. (All of the loans I took out were NOT fraud. 6 of them were truthful with real numbers from my payroll provider **(see payroll provider records, EXHIBIT D That proves against the State Medicaid charges)**. Because I broke down after he said the Federal Government would never give me a chance at home incarceration, he said for me just take the plea deal because I was not “emotionally able to fight”. I agreed because I just had my baby and lost my grandfather who raised me on top of Jason Flores Williams promising me outcomes that did not happen.

I spoke with Jason Flores Williams (Former attorney) June 20th, 2023, to get a refund, I wired Jason Flores Williams for the expert that Jason Flores Williams advised me would be helpful when we were going forward

to fight the state Medicaid case. The expert was needed because I was being accused based of off limited knowledge of the Attorney General's office. The Attorney General's office did not have a full understanding of how the class B licensed home care businesses operate, nor did the Attorney General's office understand the Medicaid billing system. Jason Flores Williams was aware of these facts. After his advice heavily swaying me NOT to go to trial with the state of Colorado Medicaid because it would be easier just to roll the state case into the Federal case, Jason Flores Williams told me I could get a refund since we were not going to trial because of his advice. He made me sign that we were done after August 15th, and he was no longer representing me. This form I was made to sign stated that I was satisfied with services before the misrepresentation and ineffective counsel that occurred before the change of plea and on the date of sentencing.

Monday, August 14th, he called that morning just to remind me that I had Federal court the next day. That was it. I was not provided anything prior to sentencing from my Attorney such as my Pre-Sentence Report, my Sentencing Memorandum, the Prosecution's late motions and order nor was any of what my former attorney Jason Flores Williams filed discussed or agreed upon with me (for example the Sentencing Memorandum). I want to say thank you again to the Honorable Judge Wang for having the missing documents sent to me and ordering an attorney be appointed to me for the appeal process. **(SEE EXHIBIT A THAT SHOW GAPS IN COMMUNICATION DURING THE TIMES OF HIME FILING WITH THE COURTS ON MY BEHALF WITHOUT DISCUSSING WITH ME).**

On the day of sentencing August 15th, 2023, the prosecuting Attorney made statements about prior criminal history. In reply to the statement, the honorable Judge Wang was correct at considering criminal history by acknowledging the statement of my prosecutors. However, I signed the appellate waiver and plea arrangements only off the strength my previous attorney Jason Flores Williams stating that judge Wang would not view it as prior criminal history and it would be looked at as the same crime at the same time. Towards the end of sentencing when the Honorable Judge Wang stated that I would be in category 2 instead of what my attorney Jason Flores Williams promised, I look at him and nudged him in confusion because What I was sentenced to in regard to my criminal history points does not align with at all with what Jason Flores Williams promised me. Jason never explained any of the court documents to me and at the change of plea, Jason told me to agree with everything the Judge would state. Jason Flores Williams made assurances about the state case which turned out to be untrue.

During sentencing on August 15th, 2023, Jason Flores Williams said nothing, and he did nothing to explain or defend me or what he stated would happen at sentencing. He packed his belongings and didn't provide me with any help or comments to the Honorable Judge Wang about the agreement. Jason Flores William's assurances made to me as my counsel caused me to now be in a criminal history category that has made me safety valve ineligible.

The reason I would not be able to successfully appeal is because I was advised by my attorney to sign the appellate waivers and plea agreements based only on his promises of being charged in federal court as a first

time offender and that when the state of Colorado petitions the Federal government for the paycheck protection money the state of Colorado is claiming, through the government, it would be revealed that it wasn't the State of Colorado Medicaid's money.

At court, my attorney advised me to give up information on a business account that was not associated with any business done with Medicaid. The account was even located at canvas credit Union whereas my business account doing business with Medicaid was located at citywide banks. The attorney General for the state of Colorado used the wrong account and the wrong balance and the wrong money to prove his case. After giving up the account information, the attorney general used the Frozen balance to say that was what was taken from Medicaid. Clearly, the money is traced back to a wire deposit from the SBA paycheck protection program. I continued to advise my attorney that I wanted to fight the state case because I didn't do the fraud. My former attorney Jason Flores Williams was well aware of this being used against me and continued to allow it **(PLEASE SEE EXHIBIT B)**.

Medicaid not paying stressed me every payroll on top of COVID-19 causing a multitude of physical and administrative issues is the reason I was seeking out the Federal loans in the first place. (This can be seen in ALL business bank statements from Citywide banks up until I started getting the loans. They can be submitted for proof).

After being accused of the crime Medicaid stopped paying me in March of 2021 and I continued to pay my employees until July 2021 from federal funds and cash advance loans. I told my former attorney that I did not owe Medicaid and instead they owe me. At a later date after pleading guilty to both the 3-point offense with the state and the Federal offense, I received an email from the Accountant and Medicaid stating that they owe me as I have previously stated. This email is proof of what I have been saying that I am innocent, and that Medicaid owes me a balance for the services my company provided. At the time of business, home care agencies could not bill for client's that they do not have a prior authorization for. This fact contradicts what I was accused for. **(PLEASE SEE EXHIBIT C as it represents my claims of me telling my former attorney Mr. Jason Flores Williams that I am innocent of the state charges. If I were guilty of fraudulently billing over 300,000 from Colorado Medicaid, the state accountant would surely not calculate any payment is owed to me. However, there are payments owed to me because I didn't commit Medicaid Fraud and Waste). I asked My former attorney Jason Flores Williams to submit this as a basis for acknowledgement of the courts. He did not care to look at the email.** The State of Colorado Medicaid case was able to continue based on my being deemed incompliant because of all the missing paperwork to prove the hours billed. Paperwork was missing because my office was unorganized due to Covid and my staff members and clients passing away during that time. I ran the business successfully passing all state audits and relicensing up until COVID 19 causing discord and death in the office. Pleading guilty to the state charges landed me in a bad predicament because the outcome was FALSE JUSTICE; In which was encouraged to take the blame by my former attorney with the understanding that my agreeing and cooperation with both government entities would be brought concurrent making me a first-time offender. I relied on my former attorney to navigate me through the justice system and legal jargon in the plea agreements signed. A lot of the time, Jason Flores Williams said not to worry about it. (The transcripts of the Medicaid case court dates and paperwork, filed along with the 3 different court dates, to sign modified plea agreements, can be submitted).

After August 15, 2023, I was very upset after being greeted with an email from Jason Flores Williams confirming his feelings toward me, listing out the crimes I was charged with. While stating I should be grateful for the sentence I am receiving from the courts after several weeks of reaching out and asking for my presentencing report and all of my case paperwork filed. He stated that he wasn't obligated to provide me with the report due to the date of his response being after August 15th, 2023. However, he did provide me with the presentencing report in that same email. (This email can be provided if requested).

My former attorney Jason Flores Williams, during his speech at sentencing, when describing portions of my character that he thought was correct, he stated to the court that I was not the type of person to go for ineffective assistance of counsel. (This should be in the transcripts). At this time, I did not even know what ineffective assistance of counsel was. He had previously mentioned to me twice before sentencing, in a joking manner not to go filing ineffective assistance of counsel on him. I didn't really understand why he was bringing ineffective assistance of counsel up to me. I never mentioned it to him because I trusted him as my counsel. I trusted his advice and knowledge of the Law. However, I looked up the terminology he used after his promises and advisement of the law turned out to be nothing of what he stated.

I would like to say that I do NOT wish to move to take negative action against Jason Flores Williams. However, I am stating the supporting facts because they are truth. I simply move to ask the court to apply and uncover the proper Justice to me aside from the unprofessional mistakes that my former attorney Jason Flores Williams made while representing me.

F. PROCEDURAL DEFAULT

Did you raise on direct appeal any of the claims you are asserting in this motion? ___ Yes X _ No (*check one*)

If you answered "Yes," state which claims were raised on direct appeal and explain why those claims are being raised again:

If you answered "No," explain why you did not raise your claims on direct appeal:

To the Honorable Court,

The defendant wishes to provide a clear explanation regarding their decision not to appeal their sentence or judgment. We humbly submit the following factors that weighed heavily on the defendant's decision-making:

1. **Appellate Waiver**: After being granted an extension for time to appeal and upon the appointment of a Public Defender, the defendant was duly informed about the appellate waiver

they had previously signed. This waiver effectively precluded the possibility of an appeal, based on the clear stipulations contained therein.

2. **Reliance on Prior Legal Counsel**: At the heart of the defendant's decision to sign the appellate waiver and plea agreements was the reliance on the representations made by their former attorney, Mr. Jason Flores Williams. Mr. Williams advised the defendant that the state crime would not be viewed in conjunction with the Federal case as a prior criminal history. Furthermore, he asserted that the state-level crime would be regarded as concurrent with the plea agreements – essentially indicating that they would be treated as a single event. This representation was not made in passing; it was a pivotal piece of advice that influenced the defendant's entire approach to the legal process. Moreover, there were witnesses present when these statements were made, emphasizing the weight the defendant placed on this advice.
3. **Good Faith in the Justice System**: The defendant, trusting in the justice system and the advice of their legal counsel, proceeded in good faith. The decision to sign the appellate waiver, under the assumptions provided by Mr. Williams, was done with the belief that the court would view the crimes in the manner as represented by their former attorney.

Given these circumstances, the defendant's decision not to appeal is not a reflection of acquiescence or satisfaction with the judgment. Instead, it stems from the pragmatic understanding that the appellate waiver, which was signed based on potentially flawed advice, would render any appeal fruitless.

The Defendant urges the Court to take into consideration these factors as a testament to the defendant's good faith, reliance on legal counsel, and belief in our justice system.

G. TIMELINESS OF MOTION

If the judgment of conviction or the sentence under attack became final more than one year prior to the filing of this motion, explain why the motion is not barred by the one-year limitation period in 28 U.S.C. § 2255(f). If additional space is needed, use extra paper to explain your answer. Please indicate that additional paper is attached and label the additional pages regarding timeliness as "G. TIMELINESS OF MOTION."

H. REQUEST FOR RELIEF

State the relief you are requesting or what you want the court to do. If additional space is needed to identify the relief you are requesting, use extra paper to request relief. Please indicate that additional paper is attached and label the additional pages regarding relief as "H. REQUEST FOR RELIEF."

PRAYER FOR RELIEF

Wherefore, in light of the aforementioned grounds and supporting facts, Petitioner DEJANE REANIECE LATTANY, *respectfully requests this honorable Court:*

1. *Grant an evidentiary hearing to determine the merits of the claims presented herein.*
2. *Take a further look into the ineffective assistance of counsel that landed me a 3 point conviction on the criminal history scale. This offense disqualified me from being Safety Valve eligible.*
3. *Vacate or set aside the Petitioner's sentence.*
4. *Allow home confinement until I am granted counsel and able to file for both 2255 and 2254.*
5. *Correct the sentence as the Court deems just and proper.*
6. *Grant such other and further relief as the Court deems equitable and just.*
7. Above all, I Request for Habeas Corpus Relief:

to vacate the conviction due to ineffective assistance of counsel along with conditional relaease

I must express concern about the quality of legal representation provided to me before and at the time of the change of plea (and at the time of sentencing). There is a reasonable basis to believe that ineffective assistance of counsel may have deprived me of a fair outcome and, consequently, the right to due process under the law.

The potential grounds for ineffective assistance of counsel include:

1. **Failure to Investigate**: It appears that my defense counsel failed to conduct a proper investigation into the case, including failure to interview crucial witnesses and gather essential evidence that could have been used in my defense resulting in a guilty plea on a 3-point state conviction rolled over into my Federal sentencing. This left me in category 2 instead of category 1. This has left me Safety Valve ineligible and a higher conviction rating.

2. **Inadequate Trial Preparation**: My defense counsel seemed unprepared for trial, thus convincing me through my trust in him to take a plea agreement, at the state level, leading to missed opportunities to challenge the prosecution's case and present a more robust defense.

3. **Lack of Zealous Advocacy**: I did not receive the zealous advocacy that is required under the Sixth Amendment. Key arguments and potential legal defenses were not pursued.

4. **Errors in Legal Advice**: It appears that counsel provided erroneous legal advice or failed to adequately explain legal options to me, potentially leading to a plea agreement that may not have been in my best interest.

Based on these concerns, I am seeking habeas corpus relief in order to address the potential violation of my constitutional rights. I believe that there are significant issues related to ineffective assistance of counsel that need to be thoroughly examined by this Court.

In light of the gravity of the potential issues raised, I respectfully request that the Court grant an evidentiary hearing to further explore these matters. I am entitled to a full and fair review of these claims to ensure that justice is served.

I understand the importance of due process, and I am committed to assisting the Court in any way necessary to ensure a just resolution of this matter.

Thank you for your consideration, and I look forward to addressing these issues with this honorable court.

A) request for relief of the current federal sentence due to ineffective counsel

B) In making the decision to grant any relief, I ask that the courts honor the fact that I have had zero prior criminal history or history of fraud up until the federal investigation. I also ask that the court consider viewing exhibit d as proof that I have ran successful business from 2015 until covid 19 and have never had any prior unsuccessful audits or accusations of fraud.

C) request that the government grant proper relief and apply justice were my rights were unprotected; due to former counsel Jason flores Williams making assurances about the state case, that has been rolled into the federal case, that has turned out to by untrue and, caused me to be in a criminal history category 2 that has caused me to be safety valve intelligible, due to ineffective counsel.

D) The defendant be placed on home confinement until corrections are made and/or proper counsel can assist in addressing the state of Colorado case where proper justice will be applied and corrections can be made to the federal sentence according to the correct criminal history points, according to the terms that i was promised by my former attorney before the change of plea and the plea agreements and appellate waivers were signed.

What I was sentenced to regarding my criminal history points does not align with the terms agreed upon from what my attorney advised me would be in my plea agreement and court documents, nor does it reflect the arguments that my attorney was to argue/present during my sentencing as he promised and advised me of the Law.

I. MOVANT/DEFENDANT'S SIGNATURE

I declare under penalty of perjury that I am the movant/defendant in this action, that I have read this motion, and that the information in this motion is true and correct. *See* 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Under Federal Rule of Civil Procedure 11, by signing below, I also certify to the best of my

knowledge, information, and belief that this motion: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation. (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically, so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the application otherwise complies with the requirements of Rule 11.

(Movant/Defendant's signature)

11/11/2023

(Date)

EXHIBIT B IN THIS EXHIBIT, I AM REFFERRING TO THE STATE OF COLORADO ATTORNEY GENERAL CLAIMING FEDERAL FUNDS WITH NO LINE BY LINE PROOF THAT THIS MONEY OR AMOUNT WAS TAKEN FROM MEDICAID.

ME (DEFENDANT)-BLUE WITH WHITE WRITING

FORMER ATTORNEY (JASON FLORES WILLIAMS)- BLACK WITH WHITE WRITING

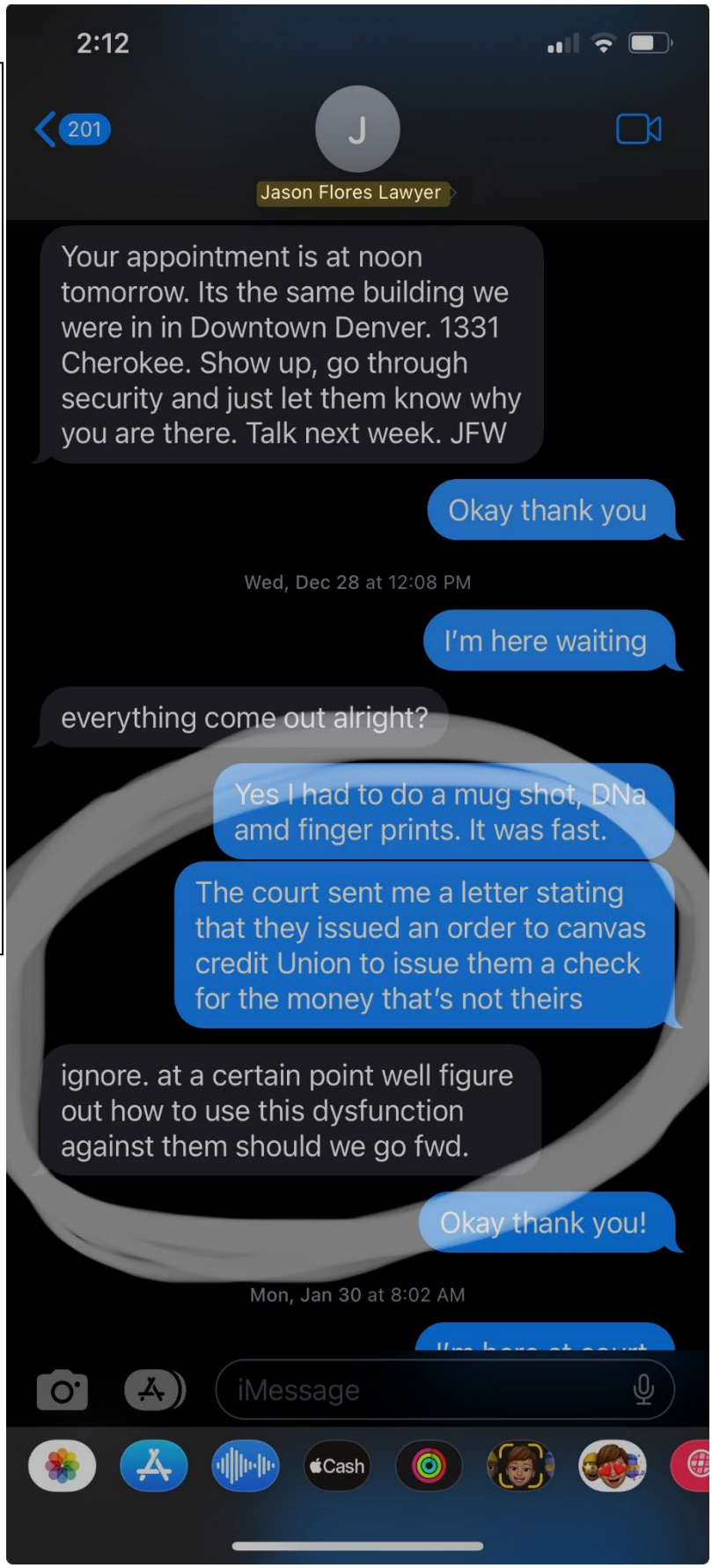
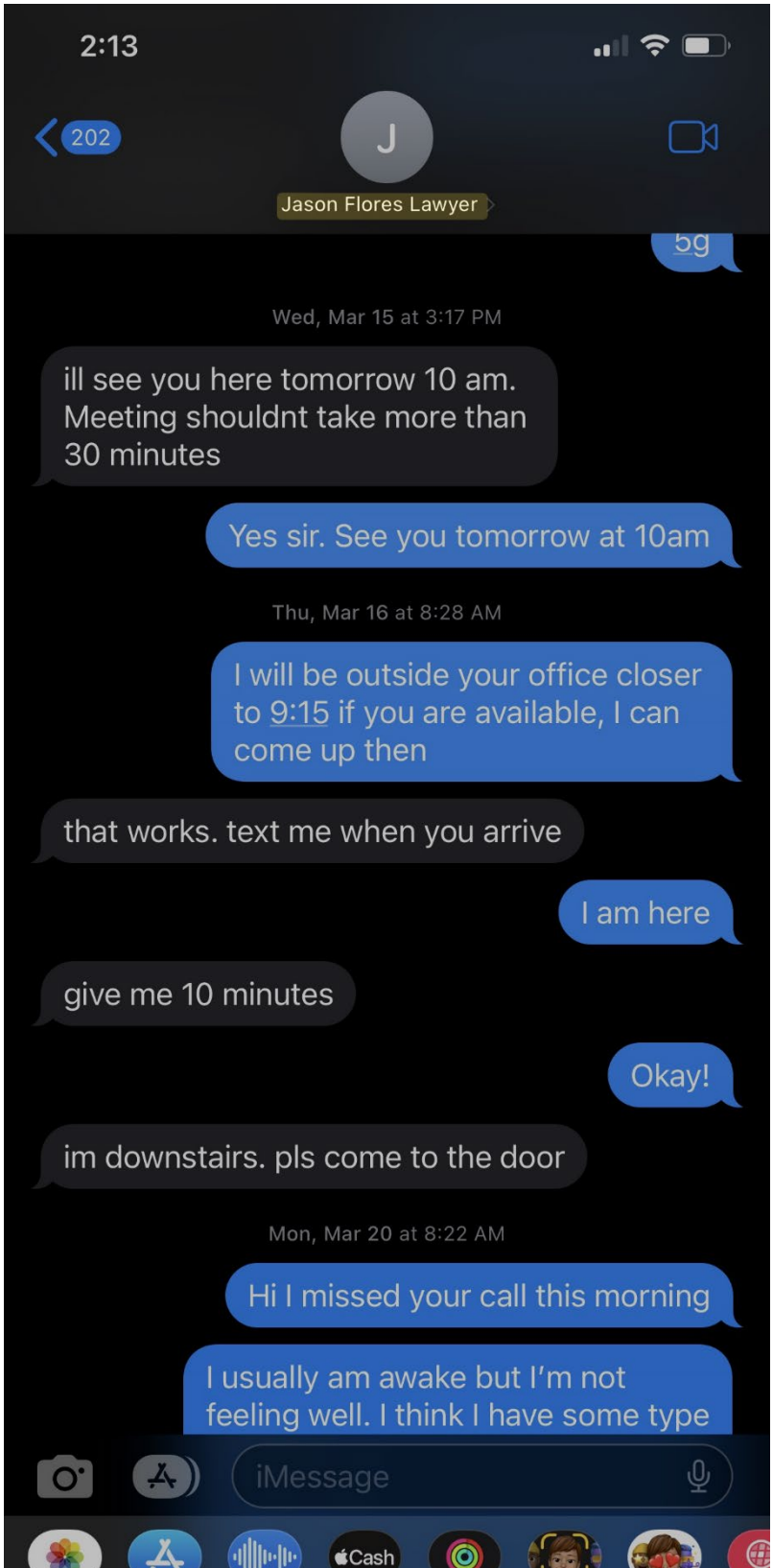
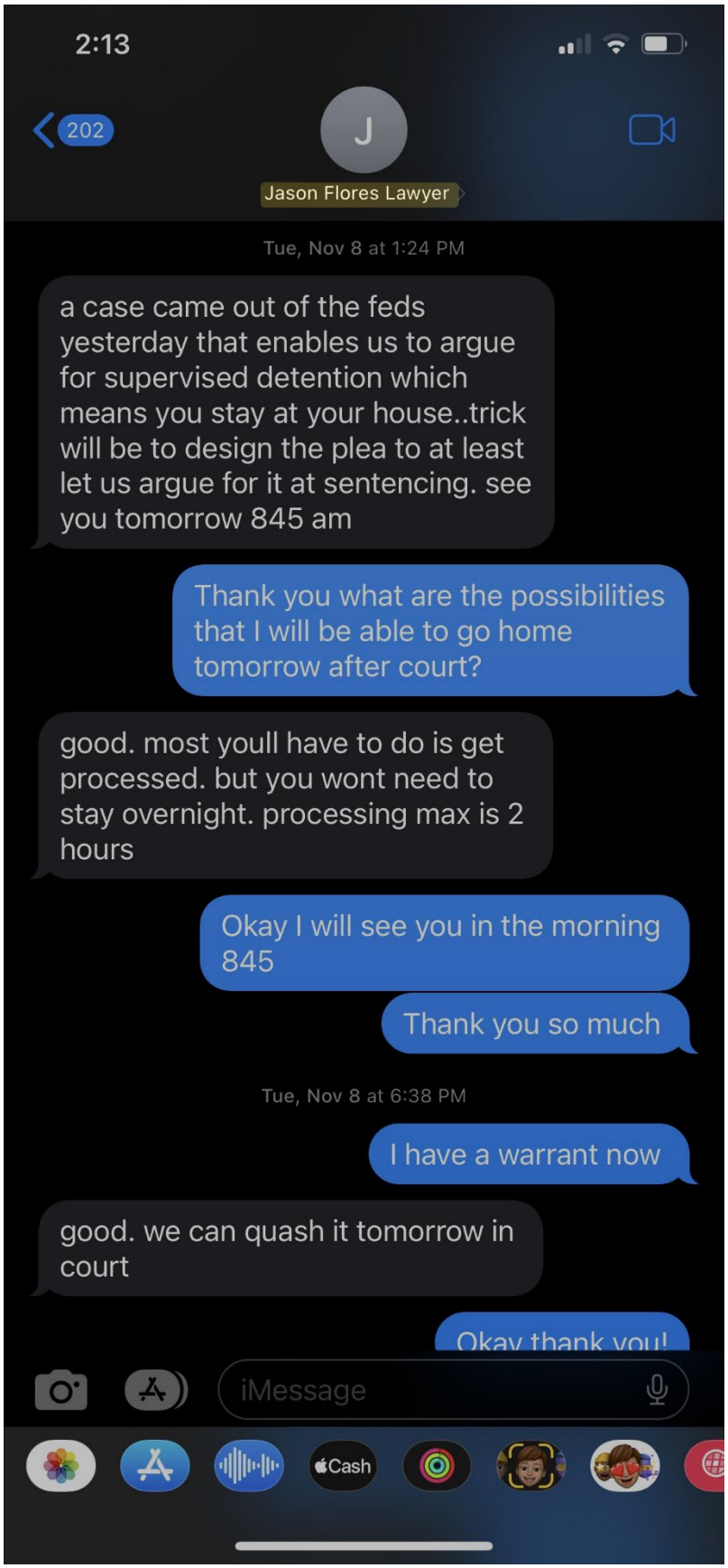


EXHIBIT A SHOWING GAPS IN COMMUNICATION AFTER MAY 2023 along with my full cooperation.

In addition, during the gaps in communication, my former attorney Jason Flores Williams filed documents without speaking to me or obtaining my consent/agreement




2:13
202
J
Jason Flores Lawyer
Tue, Nov 8 at 1:24 PM
a case came out of the feds yesterday that enables us to argue for supervised detention which means you stay at your house..trick will be to design the plea to at least let us argue for it at sentencing. see you tomorrow 845 am
Thank you what are the possibilities that I will be able to go home tomorrow after court?
good. most youll have to do is get processed. but you wont need to stay overnight. processing max is 2 hours
Okay I will see you in the morning 845
Thank you so much
Tue, Nov 8 at 6:38 PM
I have a warrant now
good. we can quash it tomorrow in court
Okay thank you!
iMessage
Cash


2:16
202
J
Jason Flores Lawyer
Thank you!
Apr 28, 2022 at 7:28 AM
good morning. are you up?
Goodmorning yes I am
May 7, 2022 at 9:38 AM
i have an agreement with the feds that if there are charges, they will let me know and we will just check in together at booking. then go. no one will ever be coming to your home
Thank you so much. I really appreciate you.
Jun 1, 2022 at 2:14 PM
I made it down here to your office a little earlier. Please let me know when you want me to come to the door
Jun 2, 2022 at 10:15 AM
your new claim has been both filed electronically and mailed
iMessage
Cash

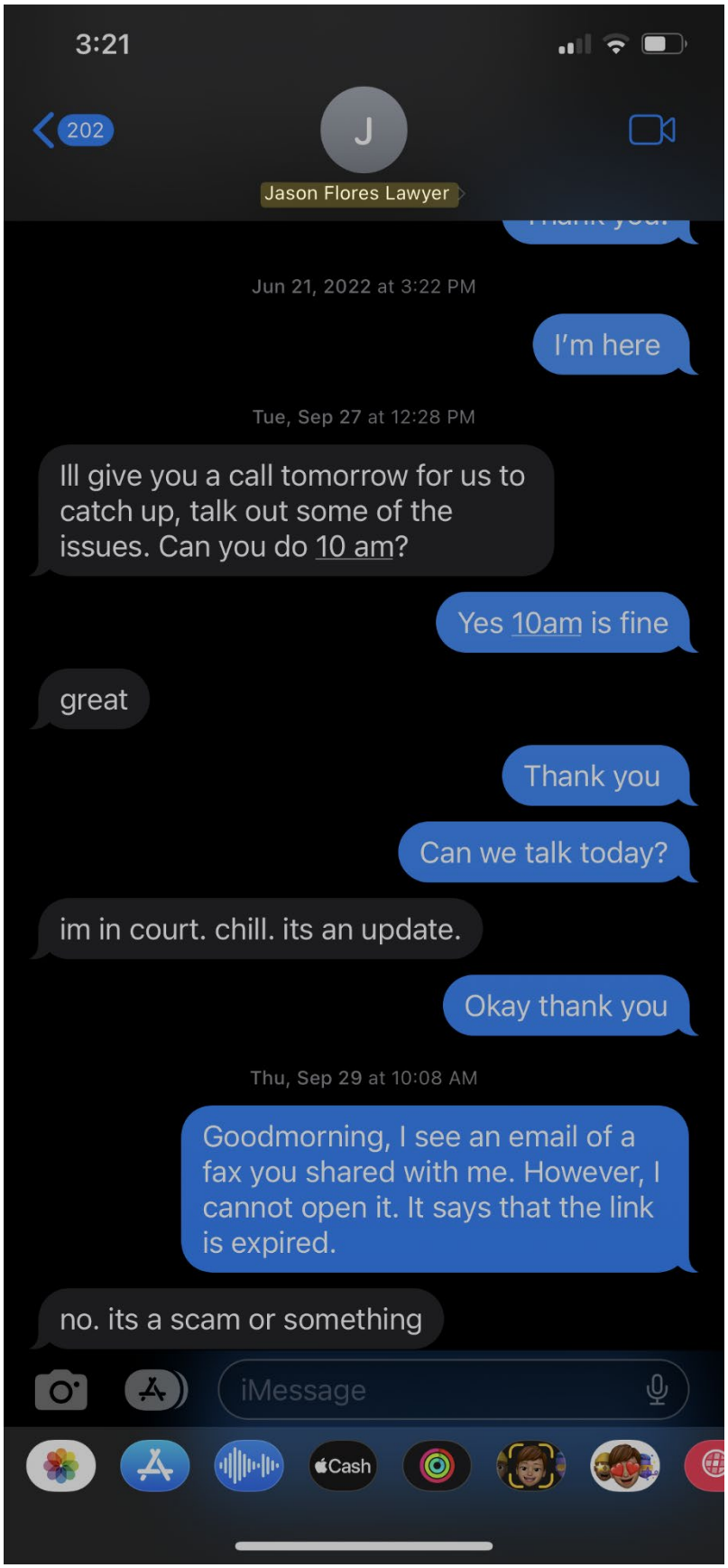

3:21
202
J
Jason Flores Lawyer
Jun 21, 2022 at 3:22 PM
I'm here
Tue, Sep 27 at 12:28 PM
Ill give you a call tomorrow for us to catch up, talk out some of the issues. Can you do 10 am?
Yes 10am is fine
great
Thank you
Can we talk today?
im in court. chill. its an update.
Okay thank you
Thu, Sep 29 at 10:08 AM
Goodmorning, I see an email of a fax you shared with me. However, I cannot open it. It says that the link is expired.
no. its a scam or something
iMessage
Cash

EXHIBIT C

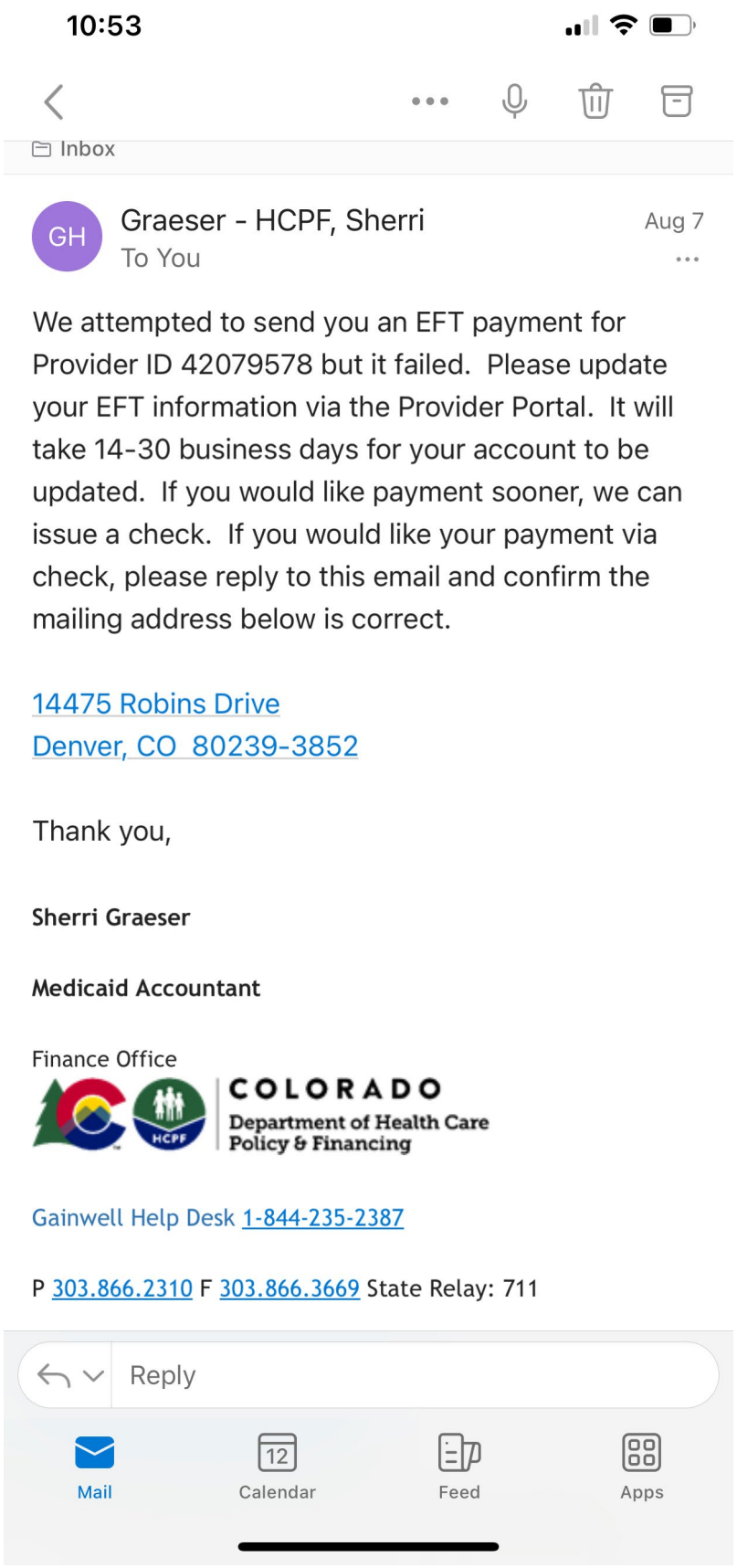

10:53
Inbox
GH
Graeser - HCPF, Sherri
To You
Aug 7
We attempted to send you an EFT payment for Provider ID 42079578 but it failed. Please update your EFT information via the Provider Portal. It will take 14-30 business days for your account to be updated. If you would like payment sooner, we can issue a check. If you would like your payment via check, please reply to this email and confirm the mailing address below is correct.
14475 Robins Drive
Denver, CO 80239-3852
Thank you,
Sherri Graeser
Medicaid Accountant
Finance Office
COLORADO
Department of Health Care Policy & Financing
Gainwell Help Desk 1-844-235-2387
P 303.866.2310 F 303.866.3669 State Relay: 711
Reply
Mail
Calendar
Feed
Apps

EXHIBIT D

DO NOT STAPLE

Form **1096**
Department of the Treasury
Internal Revenue Service

Annual Summary and Transmittal of U.S. Information Returns

OMB No. 1545-0108

2018

AGGIES ANGELS CARE PROVIDERS

14475 ROBINS DR
DENVER CO 80239

Name of person to contact	Telephone number	For Official Use Only
LATTANY DEJANE	(720) 318-0173	
E-mail address	Fax Number ( )	

1 Employer identification number	2 Social security number	3 Total number of forms	4 Federal income tax withheld	5 Total amount reported with this Form 1096
80-0438877		5	$	$ 25977.00

6 Enter an "X" in only one box below to indicate the type of form being filed. 7 Form 1099-MISC with NEC in box 7, check ... ▶ X

W-2G 32	1097-BTC 50	1098 81	1098-C 78	1098-E 84		1098-Q 74	1098-T 83	1099-A 80	1099-B 79	1099-C 85	1099-CAP 73	1099-DIV 91	1099-G 86	1099-INT 92	1099-K 10	1099-LS 16
☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

1099-LTC 93	1099-MISC 95	1099-OID 96	1099-PATR 97	1099-Q 31	1099-QA 1A	1099-R 98	1099-S 75	1099-SA 94	1099-SB 43	3921 25	3922 26	5498 28	5498-ESA 72	5498-QA 2A	5498-SA 27	
☐	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

REFERENCE COPY PREPARED BY PAYCHEX. DO NOT FILE.

Signature ▶ ..... **Title ▶** ..... **Date ▶** .....

DO NOT FILE

YOUR FEDERAL 1099 & 1096 DATA

IS FILED ELECTRONICALLY

DO NOT STAPLE

Form **1096**
Department of the Treasury
Internal Revenue Service

Annual Summary and Transmittal of U.S. Information Returns

OMB No. 1545-0108

2018

AGGIES ANGELS CARE PROVIDERS

14475 ROBINS DR
DENVER CO 80239

Name of person to contact	Telephone number
LATTANY DEJANE	(720) 318-0173
E-mail address	Fax Number ( )

For Official Use Only

1 Employer identification number	2 Social security number	3 Total number of forms	4 Federal income tax withheld	5 Total amount reported with this Form 1096
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6 Enter an "X" in only one box below to indicate the type of form being filed.

7 Form 1099-MISC with NEC in box 7, check ... ▶ X

W-2G 32	1097-BTC 50	1098 81	1098-C 78	1098-E 84		1098-Q 74	1098-T 83	1099-A 80	1099-B 79	1099-C 85	1099-CAP 73	1099-DIV 91	1099-G 86	1099-INT 92	1099-K 10	1099-LS 16
☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

1099-LTC 93	1099-MISC 95	1099-OID 96	1099-PATR 97	1099-Q 31	1099-QA 1A	1099-R 98	1099-S 75	1099-SA 94	1099-SB 43	3921 25	3922 26	5498 28	5498-ESA 72	5498-QA 2A	5498-SA 27	
☐	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

REFERENCE COPY PREPARED BY PAYCHEX. DO NOT FILE.

Signature ▶ ..... **Title ▶** ..... **Date ▶** .....

DO NOT FILE

YOUR FEDERAL 1099 & 1096 DATA

IS FILED ELECTRONICALLY

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-87-9194	0095-13058390 - 15 19010	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
ZIPPORAH ARRINGTON

COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 14125.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 14125.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	- -	0095-13058390 - 48 19010	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 696.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 696.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-95-1873	0095-13058390 - 26 19010	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 1704.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 1704.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	521-83-7462	0095-13058390 - 18 19010	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DEVIN MOORE

COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 3902.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/30941838	$ 3902.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME ☐ VOID ☐ CORRECTED
16-033 1690

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
2018	80-0438877	449-25-6930	0095-13058390 - 25 19010	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	DEMETRIA D SKIPPER 4155 E IOWA # 103 DENVER CO 80222	

1 Rents $ 0.00	2 Royalties $ 0.00	3 Other Income $ 0.00	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $ 5550.00	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/0941838	18 State income $ 5550.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME ☒ VOID ☐ CORRECTED
16-033 1690

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME ☒ VOID ☐ CORRECTED
16-033 1690

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME ☒ VOID ☐ CORRECTED
16-033 1690

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-87-9194	0095-13058390 - 15 18363	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
ZIPPORAH ARRINGTON

COPY C, FOR PAYER – DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 14125.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 14125.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	- -	0095-13058390 - 48 18363	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

COPY C, FOR PAYER – DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 696.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 696.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-95-1873	0095-13058390 - 26 18363	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

COPY C, FOR PAYER – DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 1704.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 1704.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2018	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	521-83-7462	0095-13058390 - 18 18363	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DEVIN MOORE

COPY C, FOR PAYER – DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 3902.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/30941838	$ 3902.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
2018	80-0438877	449-25-6930	0095-13058390 - 25 18363	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	DEMETRIA D SKIPPER 4155 E IOWA # 103 DENVER CO 80222	

1 Rents $ 0.00	2 Royalties $ 0.00	3 Other Income $ 0.00	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $ 5550.00	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/0941838	18 State income $ 5550.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER - DO NOT FILE. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

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1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
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5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 14125.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

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1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 14125.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $14,125.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 14125.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 14125.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $14,125.00

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	- -	0095-13058390 - 48 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

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1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 696.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	- -	0095-13058390 - 48 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

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Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

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Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	- -	0095-13058390 - 48 19010	☐

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$696.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-95-1873	0095-13058390 - 26 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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4699 KITTRIDGE
DENVER CO 80239

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				☐

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RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

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1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
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$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $3,902.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

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1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 **Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $3,902.00

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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1 Rents	2 Royalties	3 Other Income	4 **Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

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Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

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Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

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1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $5,550.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 19010	☐

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

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1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 19010	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $5,550.00

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

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$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

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Box 6. For individuals, report on Schedule C (Form 1040).

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Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 14125.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 14125.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $14,125.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 18363	☐

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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ZIPPORAH ARRINGTON

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15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-87-9194	0095-13058390 - 15 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

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1 Rents	2 Royalties	3 Other Income	4 **Federal income tax withheld**
$	$	$	$
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$	$	$ **14125.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$14,125.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	- -	0095-13058390 - 48 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 696.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $696.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	- -	0095-13058390 - 48 18363	☐

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Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

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Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	- -	0095-13058390 - 48 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 **Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **696.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$696.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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1 Rents	2 Royalities	3 Other Income	4 **Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-95-1873	0095-13058390 - 26 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 1704.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-95-1873	0095-13058390 - 26 18363	☐

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$	$	$ 1704.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $1,704.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

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Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	522-95-1873	0095-13058390 - 26 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	TENEA T LATTANY 4699 KITTRIDGE DENVER CO 80239	

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld	
$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$ 1704.00	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds	11	12	13 Excess golden parachute payments / 14 Gross proceeds paid to an attorney
	$			$ / $
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
$	$	$	CO/30941838	$ $1,704.00

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld	
$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds	11	12	13 Excess golden parachute payments / 14 Gross proceeds paid to an attorney
	$			$ / $
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
$	$	$		$

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

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5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds	11	12	13 Excess golden parachute payments / 14 Gross proceeds paid to an attorney
	$			$ / $
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
$	$	$		$

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $3,902.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	521-83-7462	0095-13058390 - 18 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

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1 Rents	2 Royalties	3 Other Income	4 **Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 3902.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $3,902.00

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

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9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $5,550.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer Identification Number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Form 1040 (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040 (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2018	80-0438877	449-25-6930	0095-13058390 - 25 18363	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5550.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $5,550.00

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	4 Federal income tax withheld
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15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

0095-13058390

Form **940 for 2018:** **Employer's Annual Federal Unemployment (FUTA) Tax Return**
Department of the Treasury - Internal Revenue Service

850113

OMB No. 1545-0028

Employer identification number (EIN): 80-0438877

Name *(not your trade name)*: AGGIES ANGELS CARE PROVIDERS

Trade name *(if any)*:

Address: 14475 ROBINS DR
Number Street | Suite or room number

DENVER | CO | 80239
City | State | ZIP code

Foreign country name | Foreign province/county | Foreign postal code

Type of Return (Check all that apply.)

- ☐ **a.** Amended
- ☐ **b.** Successor employer
- ☐ **c.** No payments to employees in 2018
- ☐ **d.** Final: Business closed or stopped paying wages

Go to *www.irs.gov/form940* for instructions and the latest information.

Read the separate instructions before you complete this form. Please type or print within the boxes.

Part 1: Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1.

1a **If you had to pay state unemployment tax in one state only, enter the state abbreviation** . . . 1a CO (Check Here)

1b **If you had to pay state unemployment tax in more than one state, you are a multi-state employer** . . . 1b ☐ Complete Schedule A (Form 940).

2 **If you paid wages in a state that is subject to CREDIT REDUCTION** . . . 2 ☐ Check here. Complete Schedule A (Form 940).

Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank.

3 **Total payments to all employees** . . . 3 123858.18

4 **Payments exempt from FUTA tax** . . . 4

Check all that apply: 4a ☐ Fringe benefits; 4b ☐ Group-term life insurance; 4c ☐ Retirement/Pension; 4d ☐ Dependent care; 4e ☐ Other

5 **Total of payments made to each employee in excess of $7,000** . . . 5 26310.90

6 **Subtotal** (line 4 + line 5 = line 6) . . . 6 26310.90

7 **Total taxable FUTA wages** (line 3 - line 6 = line 7) (see instructions) . . . 7 97547.28

8 **FUTA tax before adjustments** (line 7 x 0.006 = line 8) . . . 8 585.28

Part 3: Determine your adjustments. If any line does NOT apply, leave it blank.

9 **If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054** (line 7 x 0.054 = line 9). Go to line 12 . . . 9

10 **If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late** (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . . . 10

11 **If credit reduction applies,** enter the total from Schedule A (Form 940) . . . 11

Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank.

12 **Total FUTA tax after adjustments** (line 8 + 9 + 10 + 11 = line 12) . . . 12 585.28

13 **FUTA tax deposited for the year, including any overpayment applied from a prior year** . . . 13 585.28

14 **Balance due** If line 12 is more than line 13, enter the excess on line 14.
- If line 14 is more than $500, you must deposit your tax.
- If line 14 is $500 or less, you may pay with this return. See instructions . . . 14

15 **Overpayment** If line 13 is more than line 12, enter the excess on line 15 and check a box below . . . 15

► You **MUST** complete both pages of this form and **SIGN** it. Check one: ☐ Apply to next return. ☐ Send a refund.

Next ➡

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 11234O Form **940** (2018)

850212

Name *(not your trade name)* AGGIES ANGELS CARE PROVIDERS

Employer identification number (EIN) 80-0438877

Part 5: **Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.**

16 **Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.**

16a **1st quarter** (January 1 - March 31)	**16a**	104.94
16b **2nd quarter** (April 1 - June 30)	**16b**	129.08
16c **3rd quarter** (July 1 - September 30)	**16c**	172.14
16d **4th quarter** (October 1 - December 31)	**16d**	179.12
17 **Total tax liability for the year** (line 16a + 16b + 16c + 16d = line 17)	**17**	585.28

Total must equal line 12.

Part 6: **May we speak with your third-party designee?**

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☐ **Yes.** Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS ☐☐☐☐☐

☐ **No.**

Part 7: **Sign here. You MUST complete both pages of this form and SIGN it.**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X **Sign your name here**

Print your name here: REFERENCE COPY PREPARED

Print your title here: BY PAYCHEX. DO NOT FILE

Date

Best daytime phone

Paid preparer use only

Check if you are self-employed ☐

Preparer's name — PTIN

Preparer's signature — Date / /

Firm's name (or yours if self-employed) — EIN

Address — Phone ( ) -

City — State — ZIP code

0095-13058390 TAXPAY® 19010

0095-13058390

Form **940 for 2018:** **Employer's Annual Federal Unemployment (FUTA) Tax Return**
Department of the Treasury - Internal Revenue Service

850113

OMB No. 1545-0028

Employer identification number (EIN): 80-0438877

Name *(not your trade name)*: AGGIES ANGELS CARE PROVIDERS

Trade name *(if any)*:

Address: 14475 ROBINS DR
Number Street | Suite or room number

DENVER | CO | 80239
City | State | ZIP code

Foreign country name | Foreign province/county | Foreign postal code

Type of Return (Check all that apply.)

- ☐ **a.** Amended
- ☐ **b.** Successor employer
- ☐ **c.** No payments to employees in 2018
- ☐ **d.** Final: Business closed or stopped paying wages

Go to *www.irs.gov/form940* for instructions and the latest information.

Read the separate instructions before you complete this form. Please type or print within the boxes.

Part 1: Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1.

1a **If you had to pay state unemployment tax in one state only, enter the state abbreviation** . . . 1a CO (Check Here)

1b **If you had to pay state unemployment tax in more than one state, you are a multi-state employer** . . . 1b ☐ Complete Schedule A (Form 940).

2 **If you paid wages in a state that is subject to CREDIT REDUCTION** . . . 2 ☐ Check here. Complete Schedule A (Form 940).

Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank.

3 **Total payments to all employees** . . . 3 123858.18

4 **Payments exempt from FUTA tax** . . . 4

Check all that apply: 4a ☐ Fringe benefits; 4b ☐ Group-term life insurance; 4c ☐ Retirement/Pension; 4d ☐ Dependent care; 4e ☐ Other

5 **Total of payments made to each employee in excess of $7,000** . . . 5 26310.90

6 **Subtotal** (line 4 + line 5 = line 6) . . . 6 26310.90

7 **Total taxable FUTA wages** (line 3 - line 6 = line 7) (see instructions) . . . 7 97547.28

8 **FUTA tax before adjustments** (line 7 x 0.006 = line 8) . . . 8 585.28

Part 3: Determine your adjustments. If any line does NOT apply, leave it blank.

9 **If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054** (line 7 x 0.054 = line 9). Go to line 12 . . . 9

10 **If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late** (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . . . 10

11 **If credit reduction applies,** enter the total from Schedule A (Form 940) . . . 11

Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank.

12 **Total FUTA tax after adjustments** (line 8 + 9 + 10 + 11 = line 12) . . . 12 585.28

13 **FUTA tax deposited for the year, including any overpayment applied from a prior year** . . . 13 585.28

14 **Balance due** If line 12 is more than line 13, enter the excess on line 14.
- If line 14 is more than $500, you must deposit your tax.
- If line 14 is $500 or less, you may pay with this return. See instructions . . . 14

15 **Overpayment** If line 13 is more than line 12, enter the excess on line 15 and check a box below . . . 15

► You **MUST** complete both pages of this form and **SIGN** it. Check one: ☐ Apply to next return. ☐ Send a refund.

Next ➡

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 11234O Form **940** (2018)

850212

Name *(not your trade name)* AGGIES ANGELS CARE PROVIDERS

Employer identification number (EIN) 80-0438877

Part 5: Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.

16 Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.

16a 1st quarter (January 1 - March 31)	16a	104.94
16b 2nd quarter (April 1 - June 30)	16b	129.08
16c 3rd quarter (July 1 - September 30)	16c	172.14
16d 4th quarter (October 1 - December 31)	16d	179.12
17 Total tax liability for the year (line 16a + 16b + 16c + 16d = line 17)	17	585.28

Total must equal line 12.

Part 6: May we speak with your third-party designee?

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☐ **Yes.** Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS ☐☐☐☐☐

☐ **No.**

Part 7: Sign here. You MUST complete both pages of this form and SIGN it.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X **Sign your name here**

Print your name here: REFERENCE COPY PREPARED

Print your title here: BY PAYCHEX. DO NOT FILE

Date

Best daytime phone

Paid preparer use only

Check if you are self-employed ☐

Preparer's name — PTIN

Preparer's signature — Date / /

Firm's name (or yours if self-employed) — EIN

Address — Phone ( ) -

City — State — ZIP code

Departmental Use Only

DR 1093 (06/28/16)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0009
www.TaxColorado.com

Colorado Department of Revenue
Annual Transmittal of State W-2 Forms

161093 11124

SSN 1		SSN 2	
FEIN		Account Number	
80-0438877		30941838	
Last Name or Business Name		First Name	Middle Initial
AGGIES ANGELS CARE PROVIDERS			
Address			
14475 ROBINS DR			
City	State	ZIP	
DENVER	CO	80239	
Period (MM/YY - MM/YY)		Due Date (MM/DD/YY)	
01/18 - 12/18		01/31/19	
Number of W-2s Attached		Phone Number	
35		( )	

Mark here if this is an Amended Return ● ☐ Paid by EFT ☐

1000-130

1. Total Colorado income taxes withheld per W-2 forms attached.		2794	00
2. Total Colorado income taxes remitted for the period indicated above.	(890)	2794	00
3. A. **Balance Due** If line 1 is more than line 2, enter difference and (see instructions)	(100)	0	00
B. **Overpayment** If line 2 is more than line 1, enter the difference and (see instructions)	(415)	0	00
4. **Penalty** (see instructions)	(200)		
5. **Interest** (see instructions)	(300)		
6. **Additional Balance Paid** Add lines 3A, 4, and 5	(355)	$ 0.00	

The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.

Mail reconciliation with W-2 forms and any payment due on line 6 to: Colorado Department of Revenue, Denver, CO 80261-0009

Signed under penalty of perjury in the second degree.

Signature

REFERENCE COPY PREPARED BY PAYCHEX DO NOT FILE

Date (MM/DD/YY)

0095-13058390 19010 TAXPAY®

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*           CLIENT  13058390           *
*                                      *
*  THESE ARE YOUR W2 REFERENCE COPIES.  *
*  KEEP THESE COPIES FOR 4 YEARS.       *
*  DO NOT DISTRIBUTE TO YOUR EMPLOYEES. *
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Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000010-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-87-9194
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ZIPPORAH ARRINGTON	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1430.00	18.51
3 Social security wages	4 Social security tax withheld
1430.00	88.66
5 Medicare wages and tips	6 Medicare tax withheld
1430.00	20.74
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1430.00	12.00	1430.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000005-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 506-70-6071
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code MICHELLE A BOAKYE-LEALI 15070 ROBINS DR DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
3814.80	
3 Social security wages	4 Social security tax withheld
3814.80	236.52
5 Medicare wages and tips	6 Medicare tax withheld
3814.80	55.31
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3814.80	103.00	3814.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000035-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-99-1928
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DECHELLE BROWN 200 RAMPART WAY #204 DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1183.00	36.00
3 Social security wages	4 Social security tax withheld
1183.00	73.35
5 Medicare wages and tips	6 Medicare tax withheld
1183.00	17.15
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1183.00	29.00	1183.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000041-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-11-6922
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ANNETTE CARLISLE 4055 ALBION ST DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
2224.00	25.38
3 Social security wages	4 Social security tax withheld
2224.00	137.89
5 Medicare wages and tips	6 Medicare tax withheld
2224.00	32.25
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2224.00	14.00	2224.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000044-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
b Employer's identification number 80-0438877	a Employee's social security number 521-95-9514	1 Wages, tips, other compensation 130.00	2 Federal income tax withheld				
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 130.00	4 Social security tax withheld 8.06				
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code PRECIOUS CARTER 15460 E 13TH AVE # 302 AURORA CO 80011	5 Medicare wages and tips 130.00	6 Medicare tax withheld 1.89			
			7 Social security tips	8 Allocated tips			
			10 Dependent care benefits	11 Nonqualified plans			
15 State CO	Employer's state I.D. No. 30941838	16 State wages, tips, etc. 130.00	17 State income tax 2.00	18 Local wages, tips, etc. 130.00	19 Local income tax	20 Locality name CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000024-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
b Employer's identification number 80-0438877	a Employee's social security number 523-86-3393	1 Wages, tips, other compensation 4341.60	2 Federal income tax withheld				
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 4341.60	4 Social security tax withheld 269.18				
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	5 Medicare wages and tips 4341.60	6 Medicare tax withheld 62.95			
			7 Social security tips	8 Allocated tips			
			10 Dependent care benefits	11 Nonqualified plans			
15 State CO	Employer's state I.D. No. 30941838	16 State wages, tips, etc. 4341.60	17 State income tax	18 Local wages, tips, etc. 4341.60	19 Local income tax 16.00	20 Locality name CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000004-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
b Employer's identification number 80-0438877	a Employee's social security number 524-08-1995	1 Wages, tips, other compensation 6926.50	2 Federal income tax withheld 16.03				
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 6926.50	4 Social security tax withheld 429.44				
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	5 Medicare wages and tips 6926.50	6 Medicare tax withheld 100.43			
			7 Social security tips	8 Allocated tips			
			10 Dependent care benefits	11 Nonqualified plans			
15 State CO	Employer's state I.D. No. 30941838	16 State wages, tips, etc. 6926.50	17 State income tax 233.00	18 Local wages, tips, etc. 6926.50	19 Local income tax 18.00	20 Locality name CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000045-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124	1 Wages, tips, other compensation 621.00	2 Federal income tax withheld 15.84				
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 621.00	4 Social security tax withheld 38.50				
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223	5 Medicare wages and tips 621.00	6 Medicare tax withheld 9.00			
			7 Social security tips	8 Allocated tips			
			10 Dependent care benefits	11 Nonqualified plans			
15 State CO	Employer's state I.D. No. 30941838	16 State wages, tips, etc. 621.00	17 State income tax 15.00	18 Local wages, tips, etc. 621.00	19 Local income tax 2.00	20 Locality name CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000047-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-31-9402
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code CHANTEL ELLISON 1925 S VAUGHN WAY #308 AURORA CO 80014

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1104.00	79.60
3 Social security wages	4 Social security tax withheld
1104.00	68.45
5 Medicare wages and tips	6 Medicare tax withheld
1104.00	16.01
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1104.00	42.00	1104.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000006-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-87-3130
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code MIRNA FLORES

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
6609.60	33.30
3 Social security wages	4 Social security tax withheld
6609.60	409.80
5 Medicare wages and tips	6 Medicare tax withheld
6609.60	95.84
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6609.60	62.00	6609.60	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000036-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 562-33-6426
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code JOHN GIVENS 1155 S HAVANA ST # 396 AURORA CO 80012

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
2419.20	103.14
3 Social security wages	4 Social security tax withheld
2419.20	149.99
5 Medicare wages and tips	6 Medicare tax withheld
2419.20	35.08
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2419.20	72.00	2419.20	10.00	CO AUROR

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d Control number 0095-13058390 0000000019-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-13-8337
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
3774.00	200.88
3 Social security wages	4 Social security tax withheld
3774.00	233.99
5 Medicare wages and tips	6 Medicare tax withheld
3774.00	54.72
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	117.00	3774.00	16.00	CO AUROR

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d Control number 0095-13058390 0000000032-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 651-20-6502		1 Wages, tips, other compensation 360.00	2 Federal income tax withheld 20.58	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 360.00	4 Social security tax withheld 22.32	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code SAGUAYA JOHNSON 2975 IVANHOE STREET DENVER CO 80207	5 Medicare wages and tips 360.00	6 Medicare tax withheld 5.22	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	360.00	12.00	360.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000007-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-77-9492		1 Wages, tips, other compensation 25811.80	2 Federal income tax withheld 2307.77	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 25811.80	4 Social security tax withheld 1600.33	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	5 Medicare wages and tips 25811.80	6 Medicare tax withheld 374.27	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	25811.80	904.00	25811.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000014-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 522-95-1873		1 Wages, tips, other compensation 3744.00	2 Federal income tax withheld 211.64	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 3744.00	4 Social security tax withheld 232.13	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code TENEA T LATTANY 4699 KITTRIDGE DENVER CO 80239	5 Medicare wages and tips 3744.00	6 Medicare tax withheld 54.29	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3744.00	106.00	3744.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000028-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number		1 Wages, tips, other compensation 1142.40	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 1142.40	4 Social security tax withheld 70.83	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code JUSTINA LAWRENCE	5 Medicare wages and tips 1142.40	6 Medicare tax withheld 16.56	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1142.40		1142.40	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE 19010

d Control number 0095-13058390 0000000027-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-27-0712
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code MICHAEL LEE 146 S EAGLE CIRCLE AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 14499.10	2 Federal income tax withheld 944.29
3 Social security wages 14499.10	4 Social security tax withheld 898.94
5 Medicare wages and tips 14499.10	6 Medicare tax withheld 210.24
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	14499.10	467.00	14499.10	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE

d Control number 0095-13058390 0000000031-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-12-2152
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code PHATEEMA LOPEZ 13204 E PARKVIEW DR DENVER CO 80202	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3912.00	2 Federal income tax withheld 209.48
3 Social security wages 3912.00	4 Social security tax withheld 242.54
5 Medicare wages and tips 3912.00	6 Medicare tax withheld 56.72
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3912.00	106.00	3912.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE

d Control number 0095-13058390 0000000021-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-88-9226
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 4351.20	2 Federal income tax withheld 265.50
3 Social security wages 4351.20	4 Social security tax withheld 269.77
5 Medicare wages and tips 4351.20	6 Medicare tax withheld 63.09
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4351.20	152.00	4351.20	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE

d Control number 0095-13058390 0000000046-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0029
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 480.00	2 Federal income tax withheld 17.16
3 Social security wages 480.00	4 Social security tax withheld 29.76
5 Medicare wages and tips 480.00	6 Medicare tax withheld 6.96
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	14.00	480.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000037-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0088			1 Wages, tips, other compensation 560.00	2 Federal income tax withheld 13.96		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal				3 Social security wages 560.00	4 Social security tax withheld 34.72		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code LEYDI MARTINEZ 372 SCRANTON ST AURORA CO 80011		5 Medicare wages and tips 560.00	6 Medicare tax withheld 8.12		
				7 Social security tips	8 Allocated tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO 30941838	560.00	13.00	560.00	2.00	CO AUROR		

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000043-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 523-85-0263			1 Wages, tips, other compensation 792.00	2 Federal income tax withheld 35.16		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal				3 Social security wages 792.00	4 Social security tax withheld 49.10		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code KEIAJEAU MCGILL		5 Medicare wages and tips 792.00	6 Medicare tax withheld 11.48		
				7 Social security tips	8 Allocated tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO 30941838	792.00	24.00	792.00	2.00	CO AUROR		

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000029-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 647-50-9003			1 Wages, tips, other compensation 409.00	2 Federal income tax withheld 19.98		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal				3 Social security wages 409.00	4 Social security tax withheld 25.36		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CAMERON HOLLIS MONTOUR		5 Medicare wages and tips 409.00	6 Medicare tax withheld 5.93		
				7 Social security tips	8 Allocated tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO 30941838	409.00	12.00	409.00	2.00	CO AUROR		

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000030-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 653-07-0995			1 Wages, tips, other compensation 3089.00	2 Federal income tax withheld		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal				3 Social security wages 3089.00	4 Social security tax withheld 191.52		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code MADISEN MONTOUR 2215 S OAKLAND WAY AURORA CO 80014		5 Medicare wages and tips 3089.00	6 Medicare tax withheld 44.79		
				7 Social security tips	8 Allocated tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO 30941838	3089.00	2.00	3089.00	8.00	CO AUROR		

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000040-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 422-96-3729		1 Wages, tips, other compensation 560.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 560.00	4 Social security tax withheld 34.72	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code BETTY MOORE 4463 STEEL STREET DENVER CO 80230		5 Medicare wages and tips 560.00	6 Medicare tax withheld 8.12	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00		560.00		CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000011-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 521-83-7462		1 Wages, tips, other compensation 774.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 774.00	4 Social security tax withheld 47.99	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEVIN MOORE		5 Medicare wages and tips 774.00	6 Medicare tax withheld 11.22	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	774.00	27.00	774.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000042-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275		1 Wages, tips, other compensation 2093.00	2 Federal income tax withheld 133.84	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 2093.00	4 Social security tax withheld 129.77	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code WENDY MORALES		5 Medicare wages and tips 2093.00	6 Medicare tax withheld 30.35	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2093.00	74.00	2093.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000033-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 521-12-9049		1 Wages, tips, other compensation 403.20	2 Federal income tax withheld 24.90	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 403.20	4 Social security tax withheld 25.00	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code BENESE THOMAS 11817 E CANAL DR AURORA CO 80011		5 Medicare wages and tips 403.20	6 Medicare tax withheld 5.85	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	403.20	14.00	403.20	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000034-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 653-14-8141		1 Wages, tips, other compensation 492.80	2 Federal income tax withheld 7.24	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 492.80	4 Social security tax withheld 30.55	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code NYOMI ISIS TURPIN 11815 EAST CANAL DR AURORA CO 80011	5 Medicare wages and tips 492.80	6 Medicare tax withheld 7.15	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	492.80	10.00	492.80		CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000022-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4047		1 Wages, tips, other compensation 4151.40	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4151.40	4 Social security tax withheld 257.39	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips 4151.40	6 Medicare tax withheld 60.20	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4151.40		4151.40	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000020-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 572-91-2194		1 Wages, tips, other compensation 4731.60	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4731.60	4 Social security tax withheld 293.36	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ANGEL VIGIL 5165 W COLGATE PLACE DENVER CO 80236	5 Medicare wages and tips 4731.60	6 Medicare tax withheld 68.61	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4731.60		4731.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000038-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number		1 Wages, tips, other compensation 4209.00	2 Federal income tax withheld 282.12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4209.00	4 Social security tax withheld 260.96	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DEREK WASHINGTON	5 Medicare wages and tips 4209.00	6 Medicare tax withheld 61.03	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4209.00	156.00	4209.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 19010

d Control number 0095-13058390 0000000001-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 465-79-8669		1 Wages, tips, other compensation 4661.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4661.00	4 Social security tax withheld 288.98	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code NATALIE M WILLIAMS 2102 M L K BLVD DENVER CO 80205	5 Medicare wages and tips 4661.00	6 Medicare tax withheld 67.58	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4661.00		4661.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000009-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 510-76-6414		1 Wages, tips, other compensation 4179.18	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4179.18	4 Social security tax withheld 259.11	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 4179.18	6 Medicare tax withheld 60.60	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4179.18		4179.18	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000003-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 522-04-1936		1 Wages, tips, other compensation 3874.80	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 3874.80	4 Social security tax withheld 240.24	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CHERYL R WOODSON 1775 W MOSIER PLACE #1209 DENVER CO 80223	5 Medicare wages and tips 3874.80	6 Medicare tax withheld 56.18	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3874.80				

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number		1 Wages, tips, other compensation 123858.18	2 Federal income tax withheld 5022.30	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal X			3 Social security wages 123858.18	4 Social security tax withheld 7679.22	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips 123858.18	6 Medicare tax withheld 1795.93	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	123858.18	2794.00	119983.38	286.00	CO AUROR

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*           CLIENT  13058390           *
*                                      *
*  THESE ARE YOUR W2 REFERENCE COPIES.  *
*  KEEP THESE COPIES FOR 4 YEARS.       *
*  DO NOT DISTRIBUTE TO YOUR EMPLOYEES. *
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Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 18363

d Control number 0095-13058390 0000000010-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-87-9194
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ZIPPORAH ARRINGTON	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1430.00	18.51
3 Social security wages	4 Social security tax withheld
1430.00	88.66
5 Medicare wages and tips	6 Medicare tax withheld
1430.00	20.74
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1430.00	12.00	1430.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000005-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 506-70-6071
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code MICHELLE A BOAKYE-LEALI 15070 ROBINS DR DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
3814.80	
3 Social security wages	4 Social security tax withheld
3814.80	236.52
5 Medicare wages and tips	6 Medicare tax withheld
3814.80	55.31
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3814.80	103.00	3814.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000035-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-99-1928
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DECHELLE BROWN 200 RAMPART WAY #204 DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1183.00	36.00
3 Social security wages	4 Social security tax withheld
1183.00	73.35
5 Medicare wages and tips	6 Medicare tax withheld
1183.00	17.15
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1183.00	29.00	1183.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000041-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-11-6922
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ANNETTE CARLISLE 4055 ALBION ST DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
2224.00	25.38
3 Social security wages	4 Social security tax withheld
2224.00	137.89
5 Medicare wages and tips	6 Medicare tax withheld
2224.00	32.25
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2224.00	14.00	2224.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 18363

d Control number 0095-13058390 0000000044-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 521-95-9514		1 Wages, tips, other compensation 130.00	2 Federal income tax withheld		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 130.00	4 Social security tax withheld 8.06		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code PRECIOUS CARTER 15460 E 13TH AVE # 302 AURORA CO 80011	5 Medicare wages and tips 130.00	6 Medicare tax withheld 1.89		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	130.00	2.00	130.00		CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000024-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 523-86-3393		1 Wages, tips, other compensation 4341.60	2 Federal income tax withheld		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4341.60	4 Social security tax withheld 269.18		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	5 Medicare wages and tips 4341.60	6 Medicare tax withheld 62.95		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	4341.60		4341.60	16.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000004-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 524-08-1995		1 Wages, tips, other compensation 6926.50	2 Federal income tax withheld 16.03		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 6926.50	4 Social security tax withheld 429.44		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	5 Medicare wages and tips 6926.50	6 Medicare tax withheld 100.43		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	6926.50	233.00	6926.50	18.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000045-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124		1 Wages, tips, other compensation 621.00	2 Federal income tax withheld 15.84		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 621.00	4 Social security tax withheld 38.50		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223	5 Medicare wages and tips 621.00	6 Medicare tax withheld 9.00		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	621.00	15.00	621.00	2.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 18363

d Control number 0095-13058390 0000000047-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 80-0438877	a Employee's social security number 524-31-9402	1 Wages, tips, other compensation 1104.00	2 Federal income tax withheld 79.60			
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 1104.00	4 Social security tax withheld 68.45			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CHANTEL ELLISON 1925 S VAUGHN WAY #308 AURORA CO 80014	5 Medicare wages and tips 1104.00	6 Medicare tax withheld 16.01		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	1104.00	42.00	1104.00	2.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000006-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 80-0438877	a Employee's social security number 524-87-3130	1 Wages, tips, other compensation 6609.60	2 Federal income tax withheld 33.30			
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 6609.60	4 Social security tax withheld 409.80			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code MIRNA FLORES	5 Medicare wages and tips 6609.60	6 Medicare tax withheld 95.84		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	6609.60	62.00	6609.60	22.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000036-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 80-0438877	a Employee's social security number 562-33-6426	1 Wages, tips, other compensation 2419.20	2 Federal income tax withheld 103.14			
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 2419.20	4 Social security tax withheld 149.99			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code JOHN GIVENS 1155 S HAVANA ST # 396 AURORA CO 80012	5 Medicare wages and tips 2419.20	6 Medicare tax withheld 35.08		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	2419.20	72.00	2419.20	10.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000019-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 80-0438877	a Employee's social security number 524-13-8337	1 Wages, tips, other compensation 3774.00	2 Federal income tax withheld 200.88			
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 3774.00	4 Social security tax withheld 233.99			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips 3774.00	6 Medicare tax withheld 54.72		
			7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 30941838	3774.00	117.00	3774.00	16.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

18363

Field	Value
d Control number	0095-13058390 0000000032-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	651-20-6502
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury – Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	360.00
2 Federal income tax withheld	20.58
3 Social security wages	360.00
4 Social security tax withheld	22.32
5 Medicare wages and tips	360.00
6 Medicare tax withheld	5.22
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	SAGUAYA JOHNSON 2975 IVANHOE STREET DENVER CO 80207

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	360.00	12.00	360.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

Field	Value
d Control number	0095-13058390 0000000007-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	523-77-9492
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury – Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	25811.80
2 Federal income tax withheld	2307.77
3 Social security wages	25811.80
4 Social security tax withheld	1600.33
5 Medicare wages and tips	25811.80
6 Medicare tax withheld	374.27
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	25811.80	904.00	25811.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

Field	Value
d Control number	0095-13058390 0000000014-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	522-95-1873
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury – Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	3744.00
2 Federal income tax withheld	211.64
3 Social security wages	3744.00
4 Social security tax withheld	232.13
5 Medicare wages and tips	3744.00
6 Medicare tax withheld	54.29
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	TENEA T LATTANY 4699 KITTRIDGE DENVER CO 80239

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3744.00	106.00	3744.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

Field	Value
d Control number	0095-13058390 0000000028-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury – Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	1142.40
2 Federal income tax withheld	
3 Social security wages	1142.40
4 Social security tax withheld	70.83
5 Medicare wages and tips	1142.40
6 Medicare tax withheld	16.56
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	JUSTINA LAWRENCE

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1142.40		1142.40	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY - DO NOT FILE 18363

Field	Value
d Control number	0095-13058390 0000000027-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	524-27-0712
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	MICHAEL LEE 146 S EAGLE CIRCLE AURORA CO 80012
1 Wages, tips, other compensation	14499.10
2 Federal income tax withheld	944.29
3 Social security wages	14499.10
4 Social security tax withheld	898.94
5 Medicare wages and tips	14499.10
6 Medicare tax withheld	210.24
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	14499.10	467.00	14499.10	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY - DO NOT FILE

Field	Value
d Control number	0095-13058390 0000000031-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	653-12-2152
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	PHATEEMA LOPEZ 13204 E PARKVIEW DR DENVER CO 80202
1 Wages, tips, other compensation	3912.00
2 Federal income tax withheld	209.48
3 Social security wages	3912.00
4 Social security tax withheld	242.54
5 Medicare wages and tips	3912.00
6 Medicare tax withheld	56.72
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3912.00	106.00	3912.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY - DO NOT FILE

Field	Value
d Control number	0095-13058390 0000000021-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	524-88-9226
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226
1 Wages, tips, other compensation	4351.20
2 Federal income tax withheld	265.50
3 Social security wages	4351.20
4 Social security tax withheld	269.77
5 Medicare wages and tips	4351.20
6 Medicare tax withheld	63.09
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4351.20	152.00	4351.20	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY - DO NOT FILE

Field	Value
d Control number	0095-13058390 0000000046-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	653-14-0029
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227
1 Wages, tips, other compensation	480.00
2 Federal income tax withheld	17.16
3 Social security wages	480.00
4 Social security tax withheld	29.76
5 Medicare wages and tips	480.00
6 Medicare tax withheld	6.96
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	14.00	480.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY – DO NOT FILE 18363

d Control number 0095-13058390 0000000037-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0088		1 Wages, tips, other compensation 560.00 / 2 Federal income tax withheld 13.96
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 560.00 / 4 Social security tax withheld 34.72
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code LEYDI MARTINEZ 372 SCRANTON ST AURORA CO 80011	5 Medicare wages and tips 560.00 / 6 Medicare tax withheld 8.12
			7 Social security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00	13.00	560.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000043-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number 80-0438877	a Employee's social security number 523-85-0263		1 Wages, tips, other compensation 792.00 / 2 Federal income tax withheld 35.16
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 792.00 / 4 Social security tax withheld 49.10
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code KEIAJEAU MCGILL	5 Medicare wages and tips 792.00 / 6 Medicare tax withheld 11.48
			7 Social security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	792.00	24.00	792.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000029-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number 80-0438877	a Employee's social security number 647-50-9003		1 Wages, tips, other compensation 409.00 / 2 Federal income tax withheld 19.98
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 409.00 / 4 Social security tax withheld 25.36
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CAMERON HOLLIS MONTOUR	5 Medicare wages and tips 409.00 / 6 Medicare tax withheld 5.93
			7 Social security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	409.00	12.00	409.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000030-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number 80-0438877	a Employee's social security number 653-07-0995		1 Wages, tips, other compensation 3089.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 3089.00 / 4 Social security tax withheld 191.52
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code MADISEN MONTOUR 2215 S OAKLAND WAY AURORA CO 80014	5 Medicare wages and tips 3089.00 / 6 Medicare tax withheld 44.79
			7 Social security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3089.00	2.00	3089.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 18363

d Control number 0095-13058390 0000000040-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 422-96-3729		1 Wages, tips, other compensation 560.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 560.00	4 Social security tax withheld 34.72	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code BETTY MOORE 4463 STEEL STREET DENVER CO 80230		5 Medicare wages and tips 560.00	6 Medicare tax withheld 8.12	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00		560.00		CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000011-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 521-83-7462		1 Wages, tips, other compensation 774.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 774.00	4 Social security tax withheld 47.99	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEVIN MOORE		5 Medicare wages and tips 774.00	6 Medicare tax withheld 11.22	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	774.00	27.00	774.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000042-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275		1 Wages, tips, other compensation 2093.00	2 Federal income tax withheld 133.84	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 2093.00	4 Social security tax withheld 129.77	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code WENDY MORALES		5 Medicare wages and tips 2093.00	6 Medicare tax withheld 30.35	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2093.00	74.00	2093.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000033-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 521-12-9049		1 Wages, tips, other compensation 403.20	2 Federal income tax withheld 24.90	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 403.20	4 Social security tax withheld 25.00	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code BENESE THOMAS 11817 E CANAL DR AURORA CO 80011		5 Medicare wages and tips 403.20	6 Medicare tax withheld 5.85	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	403.20	14.00	403.20	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE 18363

d Control number 0095-13058390 0000000034-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-14-8141
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code NYOMI ISIS TURPIN 11815 EAST CANAL DR AURORA CO 80011

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
492.80	7.24
3 Social security wages	4 Social security tax withheld
492.80	30.55
5 Medicare wages and tips	6 Medicare tax withheld
492.80	7.15
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	492.80	10.00	492.80		CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000022-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4047
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
4151.40	
3 Social security wages	4 Social security tax withheld
4151.40	257.39
5 Medicare wages and tips	6 Medicare tax withheld
4151.40	60.20
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4151.40		4151.40	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000020-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 572-91-2194
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code ANGEL VIGIL 5165 W COLGATE PLACE DENVER CO 80236

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
4731.60	
3 Social security wages	4 Social security tax withheld
4731.60	293.36
5 Medicare wages and tips	6 Medicare tax withheld
4731.60	68.61
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4731.60		4731.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000038-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEREK WASHINGTON

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
4209.00	282.12
3 Social security wages	4 Social security tax withheld
4209.00	260.96
5 Medicare wages and tips	6 Medicare tax withheld
4209.00	61.03
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4209.00	156.00	4209.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE 18363

d Control number 0095-13058390 0000000001-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 465-79-8669		1 Wages, tips, other compensation 4661.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4661.00	4 Social security tax withheld 288.98	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code NATALIE M WILLIAMS 2102 M L K BLVD DENVER CO 80205	5 Medicare wages and tips 4661.00	6 Medicare tax withheld 67.58	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4661.00		4661.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE

d Control number 0095-13058390 0000000009-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 510-76-6414		1 Wages, tips, other compensation 4179.18	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4179.18	4 Social security tax withheld 259.11	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 4179.18	6 Medicare tax withheld 60.60	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4179.18		4179.18	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE

d Control number 0095-13058390 0000000003-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 522-04-1936		1 Wages, tips, other compensation 3874.80	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 3874.80	4 Social security tax withheld 240.24	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CHERYL R WOODSON 1775 W MOSIER PLACE #1209 DENVER CO 80223	5 Medicare wages and tips 3874.80	6 Medicare tax withheld 56.18	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3874.80				

Form W-2 Wage and Tax Statement 2018 — EMPLOYER REFERENCE COPY — DO NOT FILE

d Control number 0095-13058390 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number		1 Wages, tips, other compensation 123858.18	2 Federal income tax withheld 5022.30	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal X			3 Social security wages 123858.18	4 Social security tax withheld 7679.22	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips 123858.18	6 Medicare tax withheld 1795.93	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	123858.18	2794.00	119983.38	286.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000010-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-87-9194	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1430.00 — 2 Federal Income tax withheld: 18.51
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1430.00 — 4 Social Security tax withheld: 88.66
e Employee's name, address, and ZIP code: ZIPPORAH ARRINGTON	5 Medicare wages and tips: 1430.00 — 6 Medicare tax withheld: 20.74
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 3f94-3fb5-4b3f-e68c

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1430.00	12.00	1430.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000010-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-87-9194	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1430.00 — 2 Federal Income tax withheld: 18.51
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1430.00 — 4 Social Security tax withheld: 88.66
e Employee's name, address, and ZIP code: ZIPPORAH ARRINGTON	5 Medicare wages and tips: 1430.00 — 6 Medicare tax withheld: 20.74
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 3f94-3fb5-4b3f-e68c

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1430.00	12.00	1430.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000010-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-87-9194	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1430.00 — 2 Federal Income tax withheld: 18.51
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1430.00 — 4 Social Security tax withheld: 88.66
e Employee's name, address, and ZIP code: ZIPPORAH ARRINGTON	5 Medicare wages and tips: 1430.00 — 6 Medicare tax withheld: 20.74
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1430.00	12.00	1430.00	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000010-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 522-87-9194		1 Wages, tips, other compensation: 1430.00 / 2 Federal Income tax withheld: 18.51
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 1430.00 / 4 Social Security tax withheld: 88.66
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: ZIPPORAH ARRINGTON	5 Medicare wages and tips: 1430.00 / 6 Medicare tax withheld: 20.74
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1430.00	12.00	1430.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000005-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 506-70-6071	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3814.80 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3814.80 — 4 Social Security tax withheld: 236.52
e Employee's name, address, and ZIP code: MICHELLE A BOAKYE-LEALI, 15070 ROBINS DR, DENVER CO 80239	5 Medicare wages and tips: 3814.80 — 6 Medicare tax withheld: 55.31
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 9ee8-802a-2058-8555

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3814.80	103.00	3814.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000005-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 506-70-6071	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3814.80 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3814.80 — 4 Social Security tax withheld: 236.52
e Employee's name, address, and ZIP code: MICHELLE A BOAKYE-LEALI, 15070 ROBINS DR, DENVER CO 80239	5 Medicare wages and tips: 3814.80 — 6 Medicare tax withheld: 55.31
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 9ee8-802a-2058-8555

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3814.80	103.00	3814.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000005-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 506-70-6071	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3814.80 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3814.80 — 4 Social Security tax withheld: 236.52
e Employee's name, address, and ZIP code: MICHELLE A BOAKYE-LEALI, 15070 ROBINS DR, DENVER CO 80239	5 Medicare wages and tips: 3814.80 — 6 Medicare tax withheld: 55.31
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3814.80	103.00	3814.80	12.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000005-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 506-70-6071		1 Wages, tips, other compensation: 3814.80 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 3814.80 / 4 Social Security tax withheld: 236.52
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: MICHELLE A BOAKYE-LEALI 15070 ROBINS DR DENVER CO 80239	5 Medicare wages and tips: 3814.80 / 6 Medicare tax withheld: 55.31
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3814.80	103.00	3814.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000035-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-99-1928	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1183.00 — 2 Federal Income tax withheld: 36.00
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1183.00 — 4 Social Security tax withheld: 73.35
e Employee's name, address, and ZIP code: DECHELLE BROWN, 200 RAMPART WAY #204, DENVER CO 80230	5 Medicare wages and tips: 1183.00 — 6 Medicare tax withheld: 17.15
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: de28-7dc2-5c06-343a

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1183.00	29.00	1183.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000035-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-99-1928	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1183.00 — 2 Federal Income tax withheld: 36.00
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1183.00 — 4 Social Security tax withheld: 73.35
e Employee's name, address, and ZIP code: DECHELLE BROWN, 200 RAMPART WAY #204, DENVER CO 80230	5 Medicare wages and tips: 1183.00 — 6 Medicare tax withheld: 17.15
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: de28-7dc2-5c06-343a

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1183.00	29.00	1183.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000035-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-99-1928	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1183.00 — 2 Federal Income tax withheld: 36.00
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1183.00 — 4 Social Security tax withheld: 73.35
e Employee's name, address, and ZIP code: DECHELLE BROWN, 200 RAMPART WAY #204, DENVER CO 80230	5 Medicare wages and tips: 1183.00 — 6 Medicare tax withheld: 17.15
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1183.00	29.00	1183.00	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000035-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 522-99-1928		1 Wages, tips, other compensation: 1183.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 36.00
			3 Social Security wages: 1183.00
			4 Social Security tax withheld: 73.35
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: DECHELLE BROWN 200 RAMPART WAY #204 DENVER CO 80230	5 Medicare wages and tips: 1183.00
			6 Medicare tax withheld: 17.15
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1183.00	29.00	1183.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000041-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-11-6922	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2224.00 — 2 Federal Income tax withheld: 25.38
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 2224.00 — 4 Social Security tax withheld: 137.89
e Employee's name, address, and ZIP code: ANNETTE CARLISLE, 4055 ALBION ST, DENVER CO 80216	5 Medicare wages and tips: 2224.00 — 6 Medicare tax withheld: 32.25
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: e6f9-faac-eb6e-2070

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2224.00	14.00	2224.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000041-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-11-6922	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2224.00 — 2 Federal Income tax withheld: 25.38
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 2224.00 — 4 Social Security tax withheld: 137.89
e Employee's name, address, and ZIP code: ANNETTE CARLISLE, 4055 ALBION ST, DENVER CO 80216	5 Medicare wages and tips: 2224.00 — 6 Medicare tax withheld: 32.25
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: e6f9-faac-eb6e-2070

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2224.00	14.00	2224.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000041-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-11-6922	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2224.00 — 2 Federal Income tax withheld: 25.38
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 2224.00 — 4 Social Security tax withheld: 137.89
e Employee's name, address, and ZIP code: ANNETTE CARLISLE, 4055 ALBION ST, DENVER CO 80216	5 Medicare wages and tips: 2224.00 — 6 Medicare tax withheld: 32.25
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2224.00	14.00	2224.00	6.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000041-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 521-11-6922		1 Wages, tips, other compensation: 2224.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 25.38
			3 Social Security wages: 2224.00
			4 Social Security tax withheld: 137.89
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: ANNETTE CARLISLE 4055 ALBION ST DENVER CO 80216	5 Medicare wages and tips: 2224.00
			6 Medicare tax withheld: 32.25
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2224.00	14.00	2224.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000044-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-95-9514	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 130.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 130.00 — 4 Social Security tax withheld: 8.06
e Employee's name, address, and ZIP code: PRECIOUS CARTER, 15460 E 13TH AVE # 302, AURORA CO 80011	5 Medicare wages and tips: 130.00 — 6 Medicare tax withheld: 1.89
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 0088-1387-639a-21ba

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	130.00	2.00	130.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000044-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-95-9514	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 130.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 130.00 — 4 Social Security tax withheld: 8.06
e Employee's name, address, and ZIP code: PRECIOUS CARTER, 15460 E 13TH AVE # 302, AURORA CO 80011	5 Medicare wages and tips: 130.00 — 6 Medicare tax withheld: 1.89
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 0088-1387-639a-21ba

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	130.00	2.00	130.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000044-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-95-9514	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 130.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 130.00 — 4 Social Security tax withheld: 8.06
e Employee's name, address, and ZIP code: PRECIOUS CARTER, 15460 E 13TH AVE # 302, AURORA CO 80011	5 Medicare wages and tips: 130.00 — 6 Medicare tax withheld: 1.89
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	130.00	2.00	130.00	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000044-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 521-95-9514			1 Wages, tips, other compensation: 130.00	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:		3 Social Security wages: 130.00	4 Social Security tax withheld: 8.06		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: PRECIOUS CARTER 15460 E 13TH AVE # 302 AURORA CO 80011		5 Medicare wages and tips: 130.00	6 Medicare tax withheld: 1.89		
				7 Social Security tips:	8 Allocated Tips:		
				10 Dependent care benefits:	11 Nonqualified plans:		
				Verification Code:			
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 130.00	17 State income tax: 2.00	18 Local wages, tips, etc.: 130.00	19 Local income tax: 0.00	20 Locality name: CO AUROR	

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:			1 Wages, tips, other compensation:	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:		3 Social Security wages:	4 Social Security tax withheld:		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:		5 Medicare wages and tips:	6 Medicare tax withheld:		
				7 Social Security tips:	8 Allocated Tips:		
				10 Dependent care benefits:	11 Nonqualified plans:		
				Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:	

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:			1 Wages, tips, other compensation:	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:		3 Social Security wages:	4 Social Security tax withheld:		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:		5 Medicare wages and tips:	6 Medicare tax withheld:		
				7 Social Security tips:	8 Allocated Tips:		
				10 Dependent care benefits:	11 Nonqualified plans:		
				Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:	

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000024-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CALVIN COLEY, 1769 HANOVER ST, AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 4341.60	2 Federal Income tax withheld:
3 Social Security wages: 4341.60	4 Social Security tax withheld: 269.18
5 Medicare wages and tips: 4341.60	6 Medicare tax withheld: 62.95
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 39a9-03c6-810c-10cc	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4341.60		4341.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000024-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CALVIN COLEY, 1769 HANOVER ST, AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 4341.60	2 Federal Income tax withheld:
3 Social Security wages: 4341.60	4 Social Security tax withheld: 269.18
5 Medicare wages and tips: 4341.60	6 Medicare tax withheld: 62.95
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 39a9-03c6-810c-10cc	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4341.60		4341.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000024-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CALVIN COLEY, 1769 HANOVER ST, AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 4341.60	2 Federal Income tax withheld:
3 Social Security wages: 4341.60	4 Social Security tax withheld: 269.18
5 Medicare wages and tips: 4341.60	6 Medicare tax withheld: 62.95
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4341.60		4341.60	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000024-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393		1 Wages, tips, other compensation: 4341.60 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 4341.60 / 4 Social Security tax withheld: 269.18
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	5 Medicare wages and tips: 4341.60 / 6 Medicare tax withheld: 62.95
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4341.60		4341.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000004-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-08-1995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 6926.50 — 2 Federal Income tax withheld: 16.03
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 6926.50 — 4 Social Security tax withheld: 429.44
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239	5 Medicare wages and tips: 6926.50 — 6 Medicare tax withheld: 100.43
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 903f-84d6-0113-3200

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6926.50	233.00	6926.50	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000004-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-08-1995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 6926.50 — 2 Federal Income tax withheld: 16.03
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 6926.50 — 4 Social Security tax withheld: 429.44
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239	5 Medicare wages and tips: 6926.50 — 6 Medicare tax withheld: 100.43
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 903f-84d6-0113-3200

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6926.50	233.00	6926.50	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000004-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-08-1995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 6926.50 — 2 Federal Income tax withheld: 16.03
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 6926.50 — 4 Social Security tax withheld: 429.44
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239	5 Medicare wages and tips: 6926.50 — 6 Medicare tax withheld: 100.43
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6926.50	233.00	6926.50	18.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000004-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-08-1995		1 Wages, tips, other compensation: 6926.50
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 16.03
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	3 Social Security wages: 6926.50
			4 Social Security tax withheld: 429.44
			5 Medicare wages and tips: 6926.50
			6 Medicare tax withheld: 100.43
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6926.50	233.00	6926.50	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	3 Social Security wages:
			4 Social Security tax withheld:
			5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	3 Social Security wages:
			4 Social Security tax withheld:
			5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number 0095-13058390 0000000045-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124			1 Wages, tips, other compensation 621.00		2 Federal Income tax withheld 15.84	
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages 621.00		4 Social Security tax withheld 38.50	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223		5 Medicare wages and tips 621.00		6 Medicare tax withheld 9.00	
				7 Social Security tips		8 Allocated Tips	
				10 Dependent care benefits		11 Nonqualified plans	
				Verification Code e6e8-d5d3-b208-d13e			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO	30941838	621.00	15.00	621.00	2.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number 0095-13058390 0000000045-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124			1 Wages, tips, other compensation 621.00		2 Federal Income tax withheld 15.84	
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages 621.00		4 Social Security tax withheld 38.50	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223		5 Medicare wages and tips 621.00		6 Medicare tax withheld 9.00	
				7 Social Security tips		8 Allocated Tips	
				10 Dependent care benefits		11 Nonqualified plans	
				Verification Code e6e8-d5d3-b208-d13e			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO	30941838	621.00	15.00	621.00	2.00	CO AUROR	

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number 0095-13058390 0000000045-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124			1 Wages, tips, other compensation 621.00		2 Federal Income tax withheld 15.84	
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages 621.00		4 Social Security tax withheld 38.50	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223		5 Medicare wages and tips 621.00		6 Medicare tax withheld 9.00	
				7 Social Security tips		8 Allocated Tips	
				10 Dependent care benefits		11 Nonqualified plans	
				Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO	30941838	621.00	15.00	621.00	2.00	CO AUROR	

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.
Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.
B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.
C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)
D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.
E—Elective deferrals under a section 403(b) salary reduction agreement
F—Elective deferrals under a section 408(k)(6) salary reduction SEP
G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan
H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.
J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.
L—Substantiated employee business expense reimbursements (nontaxable)
M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.
N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.
P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)
Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.
R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.
S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)
T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.
V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.
W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).
Y—Deferrals under a section 409A nonqualified deferred compensation plan.
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.
AA—Designated Roth contributions under a section 401(k) plan.
BB—Designated Roth contributions under a section 403(b) plan.
DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**
EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reimbursement arrangement
GG—Income from qualified equity grants under section 83(i)
HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000045-0000W2
Void:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
b Employer's identification number: 80-0438877
a Employee's social security number: 425-45-2124
13 Statutory Employee / Retirement plan / Third-party sick pay
12 See Instrs. for Box 12:
14 Other:
e Employee's name, address, and ZIP code: APRIL D DRIVER, 2257 W BYERS DR, DENVER CO 80223

1 Wages, tips, other compensation	2 Federal Income tax withheld
621.00	15.84
3 Social Security wages	**4 Social Security tax withheld**
621.00	38.50
5 Medicare wages and tips	**6 Medicare tax withheld**
621.00	9.00
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	621.00	15.00	621.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:
Void: X
c Employer's name, address, and ZIP code:
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
b Employer's identification number:
a Employee's social security number:
13 Statutory Employee / Retirement plan / Third-party sick pay
12 See Instrs. for Box 12:
14 Other:
e Employee's name, address, and ZIP code:

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:
Void: X
c Employer's name, address, and ZIP code:
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
b Employer's identification number:
a Employee's social security number:
13 Statutory Employee / Retirement plan / Third-party sick pay
12 See Instrs. for Box 12:
14 Other:
e Employee's name, address, and ZIP code:

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000047-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-31-9402
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHANTEL ELLISON, 1925 S VAUGHN WAY #308, AURORA CO 80014	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 1104.00	2 Federal Income tax withheld: 79.60
3 Social Security wages: 1104.00	4 Social Security tax withheld: 68.45
5 Medicare wages and tips: 1104.00	6 Medicare tax withheld: 16.01
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 7123-c591-8c6c-6c33	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1104.00	42.00	1104.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000047-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-31-9402
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHANTEL ELLISON, 1925 S VAUGHN WAY #308, AURORA CO 80014	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 1104.00	2 Federal Income tax withheld: 79.60
3 Social Security wages: 1104.00	4 Social Security tax withheld: 68.45
5 Medicare wages and tips: 1104.00	6 Medicare tax withheld: 16.01
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 7123-c591-8c6c-6c33	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1104.00	42.00	1104.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000047-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-31-9402
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHANTEL ELLISON, 1925 S VAUGHN WAY #308, AURORA CO 80014	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 1104.00	2 Federal Income tax withheld: 79.60
3 Social Security wages: 1104.00	4 Social Security tax withheld: 68.45
5 Medicare wages and tips: 1104.00	6 Medicare tax withheld: 16.01
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1104.00	42.00	1104.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000047-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-31-9402		1 Wages, tips, other compensation: 1104.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 79.60
			3 Social Security wages: 1104.00
			4 Social Security tax withheld: 68.45
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: CHANTEL ELLISON 1925 S VAUGHN WAY #308 AURORA CO 80014	5 Medicare wages and tips: 1104.00
			6 Medicare tax withheld: 16.01
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1104.00	42.00	1104.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000006-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-87-3130	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 6609.60 — 2 Federal Income tax withheld: 33.30
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 6609.60 — 4 Social Security tax withheld: 409.80
e Employee's name, address, and ZIP code: MIRNA FLORES	5 Medicare wages and tips: 6609.60 — 6 Medicare tax withheld: 95.84
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 06e9-6552-a195-cf13

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6609.60	62.00	6609.60	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000006-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-87-3130	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 6609.60 — 2 Federal Income tax withheld: 33.30
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 6609.60 — 4 Social Security tax withheld: 409.80
e Employee's name, address, and ZIP code: MIRNA FLORES	5 Medicare wages and tips: 6609.60 — 6 Medicare tax withheld: 95.84
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 06e9-6552-a195-cf13

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6609.60	62.00	6609.60	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000006-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-87-3130	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 6609.60 — 2 Federal Income tax withheld: 33.30
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 6609.60 — 4 Social Security tax withheld: 409.80
e Employee's name, address, and ZIP code: MIRNA FLORES	5 Medicare wages and tips: 6609.60 — 6 Medicare tax withheld: 95.84
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6609.60	62.00	6609.60	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000006-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130		1 Wages, tips, other compensation: 6609.60 / 2 Federal Income tax withheld: 33.30
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 6609.60 / 4 Social Security tax withheld: 409.80
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: MIRNA FLORES	5 Medicare wages and tips: 6609.60 / 6 Medicare tax withheld: 95.84
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6609.60	62.00	6609.60	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000036-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 562-33-6426	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2419.20 — 2 Federal Income tax withheld: 103.14
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 2419.20 — 4 Social Security tax withheld: 149.99
e Employee's name, address, and ZIP code: JOHN GIVENS, 1155 S HAVANA ST # 396, AURORA CO 80012	5 Medicare wages and tips: 2419.20 — 6 Medicare tax withheld: 35.08
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 1c91-cad1-5ca1-0d20

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2419.20	72.00	2419.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000036-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 562-33-6426	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2419.20 — 2 Federal Income tax withheld: 103.14
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 2419.20 — 4 Social Security tax withheld: 149.99
e Employee's name, address, and ZIP code: JOHN GIVENS, 1155 S HAVANA ST # 396, AURORA CO 80012	5 Medicare wages and tips: 2419.20 — 6 Medicare tax withheld: 35.08
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 1c91-cad1-5ca1-0d20

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2419.20	72.00	2419.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000036-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 562-33-6426	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2419.20 — 2 Federal Income tax withheld: 103.14
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 2419.20 — 4 Social Security tax withheld: 149.99
e Employee's name, address, and ZIP code: JOHN GIVENS, 1155 S HAVANA ST # 396, AURORA CO 80012	5 Medicare wages and tips: 2419.20 — 6 Medicare tax withheld: 35.08
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2419.20	72.00	2419.20	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000036-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 562-33-6426		1 Wages, tips, other compensation: 2419.20
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 103.14
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: JOHN GIVENS 1155 S HAVANA ST # 396 AURORA CO 80012	3 Social Security wages: 2419.20
			4 Social Security tax withheld: 149.99
			5 Medicare wages and tips: 2419.20
			6 Medicare tax withheld: 35.08
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2419.20	72.00	2419.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	3 Social Security wages:
			4 Social Security tax withheld:
			5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	3 Social Security wages:
			4 Social Security tax withheld:
			5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000019-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-13-8337	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 3774.00 — 2 Federal Income tax withheld: 200.88
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 3774.00 — 4 Social Security tax withheld: 233.99
e Employee's name, address, and ZIP code: DEWANDA GRAHAM, 4617 FREEPORT WAY, DENVER CO 80239	5 Medicare wages and tips: 3774.00 — 6 Medicare tax withheld: 54.72
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: d6d5-5576-836b-a9a3

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	117.00	3774.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000019-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-13-8337	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 3774.00 — 2 Federal Income tax withheld: 200.88
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 3774.00 — 4 Social Security tax withheld: 233.99
e Employee's name, address, and ZIP code: DEWANDA GRAHAM, 4617 FREEPORT WAY, DENVER CO 80239	5 Medicare wages and tips: 3774.00 — 6 Medicare tax withheld: 54.72
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: d6d5-5576-836b-a9a3

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	117.00	3774.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000019-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-13-8337	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 3774.00 — 2 Federal Income tax withheld: 200.88
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 3774.00 — 4 Social Security tax withheld: 233.99
e Employee's name, address, and ZIP code: DEWANDA GRAHAM, 4617 FREEPORT WAY, DENVER CO 80239	5 Medicare wages and tips: 3774.00 — 6 Medicare tax withheld: 54.72
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	117.00	3774.00	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000019-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-13-8337		1 Wages, tips, other compensation: 3774.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 200.88
			3 Social Security wages: 3774.00
			4 Social Security tax withheld: 233.99
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips: 3774.00
			6 Medicare tax withheld: 54.72
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	117.00	3774.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000032-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 651-20-6502	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 360.00 — 2 Federal Income tax withheld: 20.58
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 360.00 — 4 Social Security tax withheld: 22.32
e Employee's name, address, and ZIP code: SAGUAYA JOHNSON, 2975 IVANHOE STREET, DENVER CO 80207	5 Medicare wages and tips: 360.00 — 6 Medicare tax withheld: 5.22
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: d624-3e34-02ce-265d

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	360.00	12.00	360.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000032-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 651-20-6502	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 360.00 — 2 Federal Income tax withheld: 20.58
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 360.00 — 4 Social Security tax withheld: 22.32
e Employee's name, address, and ZIP code: SAGUAYA JOHNSON, 2975 IVANHOE STREET, DENVER CO 80207	5 Medicare wages and tips: 360.00 — 6 Medicare tax withheld: 5.22
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: d624-3e34-02ce-265d

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	360.00	12.00	360.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000032-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 651-20-6502	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 360.00 — 2 Federal Income tax withheld: 20.58
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 360.00 — 4 Social Security tax withheld: 22.32
e Employee's name, address, and ZIP code: SAGUAYA JOHNSON, 2975 IVANHOE STREET, DENVER CO 80207	5 Medicare wages and tips: 360.00 — 6 Medicare tax withheld: 5.22
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	360.00	12.00	360.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

- d Control number: 0095-13058390 0000000032-0000W2
- Void:
- c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
- b Employer's identification number: 80-0438877
- a Employee's social security number: 651-20-6502
- 13 Statutory Employee / Retirement plan / Third-party sick pay:
- 12 See Instrs. for Box 12:
- 14 Other:
- e Employee's name, address, and ZIP code: SAGUAYA JOHNSON, 2975 IVANHOE STREET, DENVER CO 80207

1 Wages, tips, other compensation	2 Federal Income tax withheld
360.00	20.58
3 Social Security wages	**4 Social Security tax withheld**
360.00	22.32
5 Medicare wages and tips	**6 Medicare tax withheld**
360.00	5.22
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	360.00	12.00	360.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

- d Control number:
- Void: X
- c Employer's name, address, and ZIP code:
- b Employer's identification number:
- a Employee's social security number:
- 13 Statutory Employee / Retirement plan / Third-party sick pay:
- 12 See Instrs. for Box 12:
- 14 Other:
- e Employee's name, address, and ZIP code:

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

- d Control number:
- Void: X
- c Employer's name, address, and ZIP code:
- b Employer's identification number:
- a Employee's social security number:
- 13 Statutory Employee / Retirement plan / Third-party sick pay:
- 12 See Instrs. for Box 12:
- 14 Other:
- e Employee's name, address, and ZIP code:

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000007-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEJANE LATTANY, 14475 ROBINS DR, DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 25811.80	2 Federal Income tax withheld: 2307.77
3 Social Security wages: 25811.80	4 Social Security tax withheld: 1600.33
5 Medicare wages and tips: 25811.80	6 Medicare tax withheld: 374.27
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 338f-b7d2-1c99-ab08	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	25811.80	904.00	25811.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000007-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEJANE LATTANY, 14475 ROBINS DR, DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 25811.80	2 Federal Income tax withheld: 2307.77
3 Social Security wages: 25811.80	4 Social Security tax withheld: 1600.33
5 Medicare wages and tips: 25811.80	6 Medicare tax withheld: 374.27
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 338f-b7d2-1c99-ab08	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	25811.80	904.00	25811.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000007-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEJANE LATTANY, 14475 ROBINS DR, DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 25811.80	2 Federal Income tax withheld: 2307.77
3 Social Security wages: 25811.80	4 Social Security tax withheld: 1600.33
5 Medicare wages and tips: 25811.80	6 Medicare tax withheld: 374.27
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	25811.80	904.00	25811.80	12.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000007-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492		1 Wages, tips, other compensation: 25811.80
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 2307.77
			3 Social Security wages: 25811.80
			4 Social Security tax withheld: 1600.33
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	5 Medicare wages and tips: 25811.80
			6 Medicare tax withheld: 374.27
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	25811.80	904.00	25811.80	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000014-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-95-1873	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3744.00 — 2 Federal Income tax withheld: 211.64
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3744.00 — 4 Social Security tax withheld: 232.13
e Employee's name, address, and ZIP code: TENEA T LATTANY, 4699 KITTRIDGE, DENVER CO 80239	5 Medicare wages and tips: 3744.00 — 6 Medicare tax withheld: 54.29
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: c92f-b846-6c6a-970a

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3744.00	106.00	3744.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000014-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-95-1873	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3744.00 — 2 Federal Income tax withheld: 211.64
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3744.00 — 4 Social Security tax withheld: 232.13
e Employee's name, address, and ZIP code: TENEA T LATTANY, 4699 KITTRIDGE, DENVER CO 80239	5 Medicare wages and tips: 3744.00 — 6 Medicare tax withheld: 54.29
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: c92f-b846-6c6a-970a

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3744.00	106.00	3744.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000014-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-95-1873	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3744.00 — 2 Federal Income tax withheld: 211.64
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3744.00 — 4 Social Security tax withheld: 232.13
e Employee's name, address, and ZIP code: TENEA T LATTANY, 4699 KITTRIDGE, DENVER CO 80239	5 Medicare wages and tips: 3744.00 — 6 Medicare tax withheld: 54.29
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3744.00	106.00	3744.00	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000014-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873		1 Wages, tips, other compensation: 3744.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 211.64
			3 Social Security wages: 3744.00
			4 Social Security tax withheld: 232.13
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: TENEA T LATTANY 4699 KITTRIDGE DENVER CO 80239	5 Medicare wages and tips: 3744.00
			6 Medicare tax withheld: 54.29
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3744.00	106.00	3744.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000028-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 1142.40 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 1142.40 — 4 Social Security tax withheld: 70.83
e Employee's name, address, and ZIP code: JUSTINA LAWRENCE	5 Medicare wages and tips: 1142.40 — 6 Medicare tax withheld: 16.56
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: 63df-b96d-7893-fdce

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1142.40		1142.40	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000028-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 1142.40 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 1142.40 — 4 Social Security tax withheld: 70.83
e Employee's name, address, and ZIP code: JUSTINA LAWRENCE	5 Medicare wages and tips: 1142.40 — 6 Medicare tax withheld: 16.56
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: 63df-b96d-7893-fdce

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1142.40		1142.40	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000028-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 1142.40 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 1142.40 — 4 Social Security tax withheld: 70.83
e Employee's name, address, and ZIP code: JUSTINA LAWRENCE	5 Medicare wages and tips: 1142.40 — 6 Medicare tax withheld: 16.56
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1142.40		1142.40	6.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000028-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number:		1 Wages, tips, other compensation: 1142.40 / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 1142.40 / 4 Social Security tax withheld: 70.83
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: JUSTINA LAWRENCE	5 Medicare wages and tips: 1142.40 / 6 Medicare tax withheld: 16.56
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1142.40		1142.40	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000027-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-27-0712	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 14499.10 — 2 Federal Income tax withheld: 944.29
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 14499.10 — 4 Social Security tax withheld: 898.94
e Employee's name, address, and ZIP code: MICHAEL LEE, 146 S EAGLE CIRCLE, AURORA CO 80012	5 Medicare wages and tips: 14499.10 — 6 Medicare tax withheld: 210.24
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 5ddc-c309-c85b-74fe

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	14499.10	467.00	14499.10	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000027-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-27-0712	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 14499.10 — 2 Federal Income tax withheld: 944.29
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 14499.10 — 4 Social Security tax withheld: 898.94
e Employee's name, address, and ZIP code: MICHAEL LEE, 146 S EAGLE CIRCLE, AURORA CO 80012	5 Medicare wages and tips: 14499.10 — 6 Medicare tax withheld: 210.24
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 5ddc-c309-c85b-74fe

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	14499.10	467.00	14499.10	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000027-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-27-0712	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 14499.10 — 2 Federal Income tax withheld: 944.29
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 14499.10 — 4 Social Security tax withheld: 898.94
e Employee's name, address, and ZIP code: MICHAEL LEE, 146 S EAGLE CIRCLE, AURORA CO 80012	5 Medicare wages and tips: 14499.10 — 6 Medicare tax withheld: 210.24
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	14499.10	467.00	14499.10	20.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000027-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-27-0712		1 Wages, tips, other compensation: 14499.10 / 2 Federal Income tax withheld: 944.29
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 14499.10 / 4 Social Security tax withheld: 898.94
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: MICHAEL LEE 146 S EAGLE CIRCLE AURORA CO 80012	5 Medicare wages and tips: 14499.10 / 6 Medicare tax withheld: 210.24
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	14499.10	467.00	14499.10	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000031-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-12-2152
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: PHATEEMA LOPEZ, 13204 E PARKVIEW DR, DENVER CO 80202	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3912.00	209.48
3 Social Security wages	**4 Social Security tax withheld**
3912.00	242.54
5 Medicare wages and tips	**6 Medicare tax withheld**
3912.00	56.72
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

Verification Code: ff08-58a2-8770-4ac7

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3912.00	106.00	3912.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000031-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-12-2152
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: PHATEEMA LOPEZ, 13204 E PARKVIEW DR, DENVER CO 80202	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3912.00	209.48
3 Social Security wages	**4 Social Security tax withheld**
3912.00	242.54
5 Medicare wages and tips	**6 Medicare tax withheld**
3912.00	56.72
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

Verification Code: ff08-58a2-8770-4ac7

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3912.00	106.00	3912.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000031-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-12-2152
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: PHATEEMA LOPEZ, 13204 E PARKVIEW DR, DENVER CO 80202	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3912.00	209.48
3 Social Security wages	**4 Social Security tax withheld**
3912.00	242.54
5 Medicare wages and tips	**6 Medicare tax withheld**
3912.00	56.72
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3912.00	106.00	3912.00	8.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000031-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 653-12-2152		1 Wages, tips, other compensation: 3912.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 209.48
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: PHATEEMA LOPEZ 13204 E PARKVIEW DR DENVER CO 80202	3 Social Security wages: 3912.00
			4 Social Security tax withheld: 242.54
			5 Medicare wages and tips: 3912.00
			6 Medicare tax withheld: 56.72
			7 Social Security tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3912.00	106.00	3912.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	3 Social Security wages
			4 Social Security tax withheld
			5 Medicare wages and tips
			6 Medicare tax withheld
			7 Social Security tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	3 Social Security wages
			4 Social Security tax withheld
			5 Medicare wages and tips
			6 Medicare tax withheld
			7 Social Security tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000021-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-88-9226	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4351.20 — 2 Federal Income tax withheld: 265.50
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 4351.20 — 4 Social Security tax withheld: 269.77
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	5 Medicare wages and tips: 4351.20 — 6 Medicare tax withheld: 63.09
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 42fe-9081-845f-a2bc

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4351.20	152.00	4351.20	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000021-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-88-9226	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4351.20 — 2 Federal Income tax withheld: 265.50
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 4351.20 — 4 Social Security tax withheld: 269.77
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	5 Medicare wages and tips: 4351.20 — 6 Medicare tax withheld: 63.09
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 42fe-9081-845f-a2bc

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4351.20	152.00	4351.20	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000021-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-88-9226	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4351.20 — 2 Federal Income tax withheld: 265.50
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 4351.20 — 4 Social Security tax withheld: 269.77
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	5 Medicare wages and tips: 4351.20 — 6 Medicare tax withheld: 63.09
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4351.20	152.00	4351.20	18.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000021-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226		1 Wages, tips, other compensation: 4351.20
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 265.50
			3 Social Security wages: 4351.20
			4 Social Security tax withheld: 269.77
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	5 Medicare wages and tips: 4351.20
			6 Medicare tax withheld: 63.09
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4351.20	152.00	4351.20	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000046-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 480.00	2 Federal Income tax withheld: 17.16
3 Social Security wages: 480.00	4 Social Security tax withheld: 29.76
5 Medicare wages and tips: 480.00	6 Medicare tax withheld: 6.96
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 69d9-48cf-4916-6862	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	14.00	480.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000046-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 480.00	2 Federal Income tax withheld: 17.16
3 Social Security wages: 480.00	4 Social Security tax withheld: 29.76
5 Medicare wages and tips: 480.00	6 Medicare tax withheld: 6.96
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code: 69d9-48cf-4916-6862	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	14.00	480.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000046-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 480.00	2 Federal Income tax withheld: 17.16
3 Social Security wages: 480.00	4 Social Security tax withheld: 29.76
5 Medicare wages and tips: 480.00	6 Medicare tax withheld: 6.96
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	14.00	480.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000046-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029		1 Wages, tips, other compensation: 480.00 / 2 Federal Income tax withheld: 17.16
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 480.00 / 4 Social Security tax withheld: 29.76
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	5 Medicare wages and tips: 480.00 / 6 Medicare tax withheld: 6.96 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	14.00	480.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000037-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-14-0088	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 560.00 — 2 Federal Income tax withheld: 13.96
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 560.00 — 4 Social Security tax withheld: 34.72
e Employee's name, address, and ZIP code: LEYDI MARTINEZ, 372 SCRANTON ST, AURORA CO 80011	5 Medicare wages and tips: 560.00 — 6 Medicare tax withheld: 8.12
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 2b06-877a-00bd-ffe3

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00	13.00	560.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000037-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-14-0088	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 560.00 — 2 Federal Income tax withheld: 13.96
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 560.00 — 4 Social Security tax withheld: 34.72
e Employee's name, address, and ZIP code: LEYDI MARTINEZ, 372 SCRANTON ST, AURORA CO 80011	5 Medicare wages and tips: 560.00 — 6 Medicare tax withheld: 8.12
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 2b06-877a-00bd-ffe3

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00	13.00	560.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000037-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-14-0088	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 560.00 — 2 Federal Income tax withheld: 13.96
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 560.00 — 4 Social Security tax withheld: 34.72
e Employee's name, address, and ZIP code: LEYDI MARTINEZ, 372 SCRANTON ST, AURORA CO 80011	5 Medicare wages and tips: 560.00 — 6 Medicare tax withheld: 8.12
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00	13.00	560.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number 0095-13058390 0000000037-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0088				1 Wages, tips, other compensation 560.00		2 Federal Income tax withheld 13.96	
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages 560.00		4 Social Security tax withheld 34.72	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code LEYDI MARTINEZ 372 SCRANTON ST AURORA CO 80011			5 Medicare wages and tips 560.00		6 Medicare tax withheld 8.12	
					7 Social Security tips		8 Allocated Tips	
					10 Dependent care benefits		11 Nonqualified plans	
					Verification Code			
15 State CO	Employer's state I.D. No. 30941838	16 State wages, tips, etc. 560.00	17 State income tax 13.00	18 Local wages, tips, etc. 560.00	19 Local income tax 2.00	20 Locality name CO AUROR		

Form W-2 Wage and Tax Statement 2018

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation		2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages		4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips		6 Medicare tax withheld	
					7 Social Security tips		8 Allocated Tips	
					10 Dependent care benefits		11 Nonqualified plans	
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2018

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation		2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages		4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips		6 Medicare tax withheld	
					7 Social Security tips		8 Allocated Tips	
					10 Dependent care benefits		11 Nonqualified plans	
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000043-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-85-0263	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 792.00 — 2 Federal Income tax withheld: 35.16
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 792.00 — 4 Social Security tax withheld: 49.10
e Employee's name, address, and ZIP code: KEIAJEAU MCGILL	5 Medicare wages and tips: 792.00 — 6 Medicare tax withheld: 11.48
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 1229-eb43-b093-deb2

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	792.00	24.00	792.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000043-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-85-0263	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 792.00 — 2 Federal Income tax withheld: 35.16
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 792.00 — 4 Social Security tax withheld: 49.10
e Employee's name, address, and ZIP code: KEIAJEAU MCGILL	5 Medicare wages and tips: 792.00 — 6 Medicare tax withheld: 11.48
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 1229-eb43-b093-deb2

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	792.00	24.00	792.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000043-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-85-0263	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 792.00 — 2 Federal Income tax withheld: 35.16
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 792.00 — 4 Social Security tax withheld: 49.10
e Employee's name, address, and ZIP code: KEIAJEAU MCGILL	5 Medicare wages and tips: 792.00 — 6 Medicare tax withheld: 11.48
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	792.00	24.00	792.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000043-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 523-85-0263				1 Wages, tips, other compensation: 792.00	2 Federal Income tax withheld: 35.16		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages: 792.00	4 Social Security tax withheld: 49.10		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: KEIAJEAU MCGILL			5 Medicare wages and tips: 792.00	6 Medicare tax withheld: 11.48		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO	30941838	792.00	24.00	792.00	2.00	CO AUROR		

Form W-2 Wage and Tax Statement 2018

d Control number	Void: X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2018

d Control number	Void: X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000029-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 647-50-9003	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 409.00 — 2 Federal Income tax withheld: 19.98
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 409.00 — 4 Social Security tax withheld: 25.36
e Employee's name, address, and ZIP code: CAMERON HOLLIS MONTOUR	5 Medicare wages and tips: 409.00 — 6 Medicare tax withheld: 5.93
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: ff59-e990-4265-fac6

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	409.00	12.00	409.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000029-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 647-50-9003	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 409.00 — 2 Federal Income tax withheld: 19.98
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 409.00 — 4 Social Security tax withheld: 25.36
e Employee's name, address, and ZIP code: CAMERON HOLLIS MONTOUR	5 Medicare wages and tips: 409.00 — 6 Medicare tax withheld: 5.93
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: ff59-e990-4265-fac6

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	409.00	12.00	409.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000029-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 647-50-9003	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 409.00 — 2 Federal Income tax withheld: 19.98
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 409.00 — 4 Social Security tax withheld: 25.36
e Employee's name, address, and ZIP code: CAMERON HOLLIS MONTOUR	5 Medicare wages and tips: 409.00 — 6 Medicare tax withheld: 5.93
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	409.00	12.00	409.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000029-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 647-50-9003		1 Wages, tips, other compensation: 409.00 / 2 Federal Income tax withheld: 19.98
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 409.00 / 4 Social Security tax withheld: 25.36
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: CAMERON HOLLIS MONTOUR	5 Medicare wages and tips: 409.00 / 6 Medicare tax withheld: 5.93
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	409.00	12.00	409.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000030-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-07-0995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3089.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3089.00 — 4 Social Security tax withheld: 191.52
e Employee's name, address, and ZIP code: MADISEN MONTOUR, 2215 S OAKLAND WAY, AURORA CO 80014	5 Medicare wages and tips: 3089.00 — 6 Medicare tax withheld: 44.79
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 2aef-ed82-e0de-9451

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3089.00	2.00	3089.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000030-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-07-0995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3089.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3089.00 — 4 Social Security tax withheld: 191.52
e Employee's name, address, and ZIP code: MADISEN MONTOUR, 2215 S OAKLAND WAY, AURORA CO 80014	5 Medicare wages and tips: 3089.00 — 6 Medicare tax withheld: 44.79
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 2aef-ed82-e0de-9451

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3089.00	2.00	3089.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000030-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-07-0995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3089.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3089.00 — 4 Social Security tax withheld: 191.52
e Employee's name, address, and ZIP code: MADISEN MONTOUR, 2215 S OAKLAND WAY, AURORA CO 80014	5 Medicare wages and tips: 3089.00 — 6 Medicare tax withheld: 44.79
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3089.00	2.00	3089.00	8.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000030-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 653-07-0995		1 Wages, tips, other compensation: 3089.00 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 3089.00 / 4 Social Security tax withheld: 191.52
12 See Instrs. for Box 12: / 14 Other:	e Employee's name, address, and ZIP code: MADISEN MONTOUR 2215 S OAKLAND WAY AURORA CO 80014		5 Medicare wages and tips: 3089.00 / 6 Medicare tax withheld: 44.79 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3089.00	2.00	3089.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:	e Employee's name, address, and ZIP code:		5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:	e Employee's name, address, and ZIP code:		5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000040-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 422-96-3729	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 560.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 560.00 — 4 Social Security tax withheld: 34.72
e Employee's name, address, and ZIP code: BETTY MOORE, 4463 STEEL STREET, DENVER CO 80230	5 Medicare wages and tips: 560.00 — 6 Medicare tax withheld: 8.12
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 0775-ef5b-7ce8-3a9a

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00		560.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000040-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 422-96-3729	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 560.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 560.00 — 4 Social Security tax withheld: 34.72
e Employee's name, address, and ZIP code: BETTY MOORE, 4463 STEEL STREET, DENVER CO 80230	5 Medicare wages and tips: 560.00 — 6 Medicare tax withheld: 8.12
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 0775-ef5b-7ce8-3a9a

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00		560.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000040-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 422-96-3729	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 560.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 560.00 — 4 Social Security tax withheld: 34.72
e Employee's name, address, and ZIP code: BETTY MOORE, 4463 STEEL STREET, DENVER CO 80230	5 Medicare wages and tips: 560.00 — 6 Medicare tax withheld: 8.12
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00		560.00	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000040-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 422-96-3729		1 Wages, tips, other compensation: 560.00 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 560.00 / 4 Social Security tax withheld: 34.72
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: BETTY MOORE 4463 STEEL STREET DENVER CO 80230	5 Medicare wages and tips: 560.00 / 6 Medicare tax withheld: 8.12
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	560.00		560.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

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Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000011-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-83-7462	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 774.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 774.00 — 4 Social Security tax withheld: 47.99
e Employee's name, address, and ZIP code: DEVIN MOORE	5 Medicare wages and tips: 774.00 — 6 Medicare tax withheld: 11.22
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: edf2-b40b-8a85-b2c9

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	774.00	27.00	774.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000011-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-83-7462	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 774.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 774.00 — 4 Social Security tax withheld: 47.99
e Employee's name, address, and ZIP code: DEVIN MOORE	5 Medicare wages and tips: 774.00 — 6 Medicare tax withheld: 11.22
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: edf2-b40b-8a85-b2c9

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	774.00	27.00	774.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000011-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-83-7462	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 774.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 774.00 — 4 Social Security tax withheld: 47.99
e Employee's name, address, and ZIP code: DEVIN MOORE	5 Medicare wages and tips: 774.00 — 6 Medicare tax withheld: 11.22
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	774.00	27.00	774.00	4.00	CO AUROR

Notice to Employee

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Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number 0095-13058390 0000000011-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 521-83-7462				1 Wages, tips, other compensation 774.00	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages 774.00	4 Social Security tax withheld 47.99		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DEVIN MOORE			5 Medicare wages and tips 774.00	6 Medicare tax withheld 11.22		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO	30941838	774.00	27.00	774.00	4.00	CO AUROR		

Form W-2 Wage and Tax Statement 2018

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2018

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000042-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-93-4275	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2093.00 — 2 Federal Income tax withheld: 133.84
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 2093.00 — 4 Social Security tax withheld: 129.77
e Employee's name, address, and ZIP code: WENDY MORALES	5 Medicare wages and tips: 2093.00 — 6 Medicare tax withheld: 30.35
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 7f16-04d1-e66d-1fc1

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2093.00	74.00	2093.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000042-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-93-4275	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2093.00 — 2 Federal Income tax withheld: 133.84
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 2093.00 — 4 Social Security tax withheld: 129.77
e Employee's name, address, and ZIP code: WENDY MORALES	5 Medicare wages and tips: 2093.00 — 6 Medicare tax withheld: 30.35
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 7f16-04d1-e66d-1fc1

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2093.00	74.00	2093.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000042-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-93-4275	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2093.00 — 2 Federal Income tax withheld: 133.84
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 2093.00 — 4 Social Security tax withheld: 129.77
e Employee's name, address, and ZIP code: WENDY MORALES	5 Medicare wages and tips: 2093.00 — 6 Medicare tax withheld: 30.35
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2093.00	74.00	2093.00	6.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000042-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275		1 Wages, tips, other compensation: 2093.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 133.84
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: WENDY MORALES	3 Social Security wages: 2093.00
			4 Social Security tax withheld: 129.77
			5 Medicare wages and tips: 2093.00
			6 Medicare tax withheld: 30.35
			7 Social Security tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2093.00	74.00	2093.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	3 Social Security wages:
			4 Social Security tax withheld:
			5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	3 Social Security wages:
			4 Social Security tax withheld:
			5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000033-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-12-9049	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 403.20 — 2 Federal Income tax withheld: 24.90
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 403.20 — 4 Social Security tax withheld: 25.00
e Employee's name, address, and ZIP code: BENESE THOMAS, 11817 E CANAL DR, AURORA CO 80011	5 Medicare wages and tips: 403.20 — 6 Medicare tax withheld: 5.85
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: cd5e-ea1b-adf1-2132

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	403.20	14.00	403.20	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000033-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-12-9049	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 403.20 — 2 Federal Income tax withheld: 24.90
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 403.20 — 4 Social Security tax withheld: 25.00
e Employee's name, address, and ZIP code: BENESE THOMAS, 11817 E CANAL DR, AURORA CO 80011	5 Medicare wages and tips: 403.20 — 6 Medicare tax withheld: 5.85
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: cd5e-ea1b-adf1-2132

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	403.20	14.00	403.20	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000033-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 521-12-9049	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 403.20 — 2 Federal Income tax withheld: 24.90
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 403.20 — 4 Social Security tax withheld: 25.00
e Employee's name, address, and ZIP code: BENESE THOMAS, 11817 E CANAL DR, AURORA CO 80011	5 Medicare wages and tips: 403.20 — 6 Medicare tax withheld: 5.85
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	403.20	14.00	403.20	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000033-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 521-12-9049		1 Wages, tips, other compensation: 403.20 — 2 Federal Income tax withheld: 24.90
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 403.20 — 4 Social Security tax withheld: 25.00
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: BENESE THOMAS 11817 E CANAL DR AURORA CO 80011	5 Medicare wages and tips: 403.20 — 6 Medicare tax withheld: 5.85
			7 Social Security tips — 8 Allocated Tips
			10 Dependent care benefits — 11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	403.20	14.00	403.20	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation — 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages — 4 Social Security tax withheld
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips — 6 Medicare tax withheld
			7 Social Security tips — 8 Allocated Tips
			10 Dependent care benefits — 11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation — 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages — 4 Social Security tax withheld
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips — 6 Medicare tax withheld
			7 Social Security tips — 8 Allocated Tips
			10 Dependent care benefits — 11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000034-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN, 11815 EAST CANAL DR, AURORA CO 80011

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 492.80	2 Federal Income tax withheld: 7.24
3 Social Security wages: 492.80	4 Social Security tax withheld: 30.55
5 Medicare wages and tips: 492.80	6 Medicare tax withheld: 7.15
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans
Verification Code: 01d4-c49c-8b95-78b4	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	492.80	10.00	492.80	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000034-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN, 11815 EAST CANAL DR, AURORA CO 80011

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 492.80	2 Federal Income tax withheld: 7.24
3 Social Security wages: 492.80	4 Social Security tax withheld: 30.55
5 Medicare wages and tips: 492.80	6 Medicare tax withheld: 7.15
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans
Verification Code: 01d4-c49c-8b95-78b4	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	492.80	10.00	492.80	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000034-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN, 11815 EAST CANAL DR, AURORA CO 80011

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 492.80	2 Federal Income tax withheld: 7.24
3 Social Security wages: 492.80	4 Social Security tax withheld: 30.55
5 Medicare wages and tips: 492.80	6 Medicare tax withheld: 7.15
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	492.80	10.00	492.80	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000034-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141			1 Wages, tips, other compensation: 492.80	2 Federal Income tax withheld: 7.24		
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages: 492.80	4 Social Security tax withheld: 30.55		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN 11815 EAST CANAL DR AURORA CO 80011		5 Medicare wages and tips: 492.80	6 Medicare tax withheld: 7.15		
				7 Social Security tips	8 Allocated Tips		
				10 Dependent care benefits	11 Nonqualified plans		
				Verification Code			
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 492.80	17 State income tax: 10.00	18 Local wages, tips, etc.: 492.80	19 Local income tax: 0.00	20 Locality name: CO AUROR	

Form W-2 Wage and Tax Statement 2018

d Control number	Void: X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number			1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
				7 Social Security tips	8 Allocated Tips		
				10 Dependent care benefits	11 Nonqualified plans		
				Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2018

d Control number	Void: X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number			1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
				7 Social Security tips	8 Allocated Tips		
				10 Dependent care benefits	11 Nonqualified plans		
				Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000022-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-93-4047	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4151.40 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4151.40 — 4 Social Security tax withheld: 257.39
e Employee's name, address, and ZIP code: JASMINE VALDEZ, 2342 MOLINE STREET, AURORA CO 80010	5 Medicare wages and tips: 4151.40 — 6 Medicare tax withheld: 60.20
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: b74b-c9cc-88f0-ea44

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4151.40		4151.40	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000022-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-93-4047	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4151.40 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4151.40 — 4 Social Security tax withheld: 257.39
e Employee's name, address, and ZIP code: JASMINE VALDEZ, 2342 MOLINE STREET, AURORA CO 80010	5 Medicare wages and tips: 4151.40 — 6 Medicare tax withheld: 60.20
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: b74b-c9cc-88f0-ea44

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4151.40		4151.40	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000022-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-93-4047	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4151.40 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4151.40 — 4 Social Security tax withheld: 257.39
e Employee's name, address, and ZIP code: JASMINE VALDEZ, 2342 MOLINE STREET, AURORA CO 80010	5 Medicare wages and tips: 4151.40 — 6 Medicare tax withheld: 60.20
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4151.40		4151.40	18.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000022-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047		1 Wages, tips, other compensation: 4151.40 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 4151.40 / 4 Social Security tax withheld: 257.39
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips: 4151.40 / 6 Medicare tax withheld: 60.20
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4151.40		4151.40	18.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000020-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 572-91-2194	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4731.60 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4731.60 — 4 Social Security tax withheld: 293.36
e Employee's name, address, and ZIP code: ANGEL VIGIL, 5165 W COLGATE PLACE, DENVER CO 80236	5 Medicare wages and tips: 4731.60 — 6 Medicare tax withheld: 68.61
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 8bf2-0ad9-8932-df9c

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4731.60		4731.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000020-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 572-91-2194	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4731.60 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4731.60 — 4 Social Security tax withheld: 293.36
e Employee's name, address, and ZIP code: ANGEL VIGIL, 5165 W COLGATE PLACE, DENVER CO 80236	5 Medicare wages and tips: 4731.60 — 6 Medicare tax withheld: 68.61
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code: 8bf2-0ad9-8932-df9c

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4731.60		4731.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000020-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 572-91-2194	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4731.60 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4731.60 — 4 Social Security tax withheld: 293.36
e Employee's name, address, and ZIP code: ANGEL VIGIL, 5165 W COLGATE PLACE, DENVER CO 80236	5 Medicare wages and tips: 4731.60 — 6 Medicare tax withheld: 68.61
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans
	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4731.60		4731.60	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000020-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 572-91-2194		1 Wages, tips, other compensation: 4731.60 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 4731.60 / 4 Social Security tax withheld: 293.36
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: ANGEL VIGIL 5165 W COLGATE PLACE DENVER CO 80236	5 Medicare wages and tips: 4731.60 / 6 Medicare tax withheld: 68.61 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4731.60		4731.60	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000038-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 4209.00 — 2 Federal Income tax withheld: 282.12
	3 Social Security wages: 4209.00 — 4 Social Security tax withheld: 260.96
12 See Instrs. for Box 12 — 14 Other	e Employee's name, address, and ZIP code: DEREK WASHINGTON
	5 Medicare wages and tips: 4209.00 — 6 Medicare tax withheld: 61.03
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: 0084-a025-5496-1681

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4209.00	156.00	4209.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000038-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 4209.00 — 2 Federal Income tax withheld: 282.12
	3 Social Security wages: 4209.00 — 4 Social Security tax withheld: 260.96
12 See Instrs. for Box 12 — 14 Other	e Employee's name, address, and ZIP code: DEREK WASHINGTON
	5 Medicare wages and tips: 4209.00 — 6 Medicare tax withheld: 61.03
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: 0084-a025-5496-1681

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4209.00	156.00	4209.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000038-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 4209.00 — 2 Federal Income tax withheld: 282.12
	3 Social Security wages: 4209.00 — 4 Social Security tax withheld: 260.96
12 See Instrs. for Box 12 — 14 Other	e Employee's name, address, and ZIP code: DEREK WASHINGTON
	5 Medicare wages and tips: 4209.00 — 6 Medicare tax withheld: 61.03
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4209.00	156.00	4209.00	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000038-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number:		1 Wages, tips, other compensation: 4209.00
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 282.12
			3 Social Security wages: 4209.00
			4 Social Security tax withheld: 260.96
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: DEREK WASHINGTON	5 Medicare wages and tips: 4209.00
			6 Medicare tax withheld: 61.03
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4209.00	156.00	4209.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000001-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 465-79-8669	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4661.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4661.00 — 4 Social Security tax withheld: 288.98
e Employee's name, address, and ZIP code: NATALIE M WILLIAMS, 2102 M L K BLVD, DENVER CO 80205	5 Medicare wages and tips: 4661.00 — 6 Medicare tax withheld: 67.58
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: b9fc-3694-d239-35b4

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4661.00		4661.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000001-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 465-79-8669	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4661.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4661.00 — 4 Social Security tax withheld: 288.98
e Employee's name, address, and ZIP code: NATALIE M WILLIAMS, 2102 M L K BLVD, DENVER CO 80205	5 Medicare wages and tips: 4661.00 — 6 Medicare tax withheld: 67.58
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: b9fc-3694-d239-35b4

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4661.00		4661.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000001-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 465-79-8669	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4661.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4661.00 — 4 Social Security tax withheld: 288.98
e Employee's name, address, and ZIP code: NATALIE M WILLIAMS, 2102 M L K BLVD, DENVER CO 80205	5 Medicare wages and tips: 4661.00 — 6 Medicare tax withheld: 67.58
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4661.00		4661.00	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000001-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 465-79-8669		1 Wages, tips, other compensation: 4661.00 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 4661.00 / 4 Social Security tax withheld: 288.98
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: NATALIE M WILLIAMS 2102 M L K BLVD DENVER CO 80205	5 Medicare wages and tips: 4661.00 / 6 Medicare tax withheld: 67.58 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4661.00		4661.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans: Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 510-76-6414	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4179.18 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 4179.18 — 4 Social Security tax withheld: 259.11
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	5 Medicare wages and tips: 4179.18 — 6 Medicare tax withheld: 60.60
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: aa86-8cf9-f93c-0f5f

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4179.18		4179.18	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 510-76-6414	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4179.18 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 4179.18 — 4 Social Security tax withheld: 259.11
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	5 Medicare wages and tips: 4179.18 — 6 Medicare tax withheld: 60.60
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code: aa86-8cf9-f93c-0f5f

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4179.18		4179.18	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 510-76-6414	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4179.18 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 4179.18 — 4 Social Security tax withheld: 259.11
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	5 Medicare wages and tips: 4179.18 — 6 Medicare tax withheld: 60.60
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:
	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4179.18		4179.18	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000009-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414		1 Wages, tips, other compensation: 4179.18 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 4179.18 / 4 Social Security tax withheld: 259.11
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips: 4179.18 / 6 Medicare tax withheld: 60.60
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4179.18		4179.18	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $7,960.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,674.60 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $18,500 ($12,500 if you only have SIMPLE plans; $21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $18,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. *If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.*

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: *Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.*

Form W-2 Wage and Tax Statement 2018 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000003-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-04-1936
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHERYL R WOODSON, 1775 W MOSIER PLACE #1209, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3874.80	
3 Social Security wages	**4 Social Security tax withheld**
3874.80	240.24
5 Medicare wages and tips	**6 Medicare tax withheld**
3874.80	56.18
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	
750b-7549-734b-3720	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3874.80				

Form W-2 Wage and Tax Statement 2018 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000003-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-04-1936
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHERYL R WOODSON, 1775 W MOSIER PLACE #1209, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3874.80	
3 Social Security wages	**4 Social Security tax withheld**
3874.80	240.24
5 Medicare wages and tips	**6 Medicare tax withheld**
3874.80	56.18
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	
750b-7549-734b-3720	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3874.80				

Form W-2 Wage and Tax Statement 2018 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000003-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-04-1936
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHERYL R WOODSON, 1775 W MOSIER PLACE #1209, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3874.80	
3 Social Security wages	**4 Social Security tax withheld**
3874.80	240.24
5 Medicare wages and tips	**6 Medicare tax withheld**
3874.80	56.18
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3874.80				

33333	a Control number: 0095-13058390	For Official Use Only ▶ OMB No. 1545-0008

b Kind of Payer (Check one): 941 [X] · Military [ ] · 943 [ ] · 944 [ ] · CT-1 [ ] · Hshld. emp. [ ] · Medicare govt. emp. [ ]

Kind of Employer (Check one): None apply [ ] · 501c non-govt. [ ] · State/local non-501c [X] · State/local 501c [ ] · Federal govt. [ ] · Third-party sick pay (Check if applicable) [ ]

c Total number of Forms W-2: 35	d Establishment number
1 Wages, tips, other compensation: 123858.18	2 Federal income tax withheld: 5022.30
e Employer identification number (EIN): 80-0438877	
3 Social security wages: 123858.18	4 Social security tax withheld: 7679.22
f Employer's name: AGGIES ANGELS CARE PROVIDERS	
5 Medicare wages and tips: 123858.18	6 Medicare tax withheld: 1795.93
g Employer's address and ZIP code: 14475 ROBINS DR DENVER CO 80239	
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a Deferred compensation
h Other EIN used this year	
13 For third-party sick pay use only	12b
15 State / Employer's state ID number	14 Income tax withheld by payer of third-party sick pay
16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax
Employer's contact person: LATTANY DEJANE	Employer's telephone number: (720) 318-0173
For Official Use Only: 0000/1124	
Employer's fax number	Employer's email address

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ REFERENCE COPY PREPARED BY PAYCHEX. Title ▶ DO NOT FILE. Date ▶

Form **W-3 Transmittal of Wage and Tax Statements** **2018** Department of the Treasury Internal Revenue Service

DO NOT FILE

YOUR FEDERAL W-2 & W-3 DATA IS FILED ELECTRONICALLY

33333	a Control number: 0095-13058390	For Official Use Only ▶ OMB No. 1545-0008

b Kind of Payer (Check one): 941 [X] · Military [ ] · 943 [ ] · 944 [ ] · CT-1 [ ] · Hshld. emp. [ ] · Medicare govt. emp. [ ]

Kind of Employer (Check one): None apply [ ] · 501c non-govt. [ ] · State/local non-501c [X] · State/local 501c [ ] · Federal govt. [ ]

Third-party sick pay (Check if applicable) [ ]

c Total number of Forms W-2: 35	d Establishment number:
1 Wages, tips, other compensation: 123858.18	2 Federal income tax withheld: 5022.30
e Employer identification number (EIN): 80-0438877	
3 Social security wages: 123858.18	4 Social security tax withheld: 7679.22
f Employer's name: AGGIES ANGELS CARE PROVIDERS	
5 Medicare wages and tips: 123858.18	6 Medicare tax withheld: 1795.93
14475 ROBINS DR DENVER CO 80239	
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a Deferred compensation
g Employer's address and ZIP code	
h Other EIN used this year	
13 For third-party sick pay use only	12b
15 State / Employer's state ID number	14 Income tax withheld by payer of third-party sick pay
16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax
Employer's contact person: LATTANY DEJANE	Employer's telephone number: (720) 318-0173
For Official Use Only: 0000/1124	
Employer's fax number	Employer's email address

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ REFERENCE COPY PREPARED BY PAYCHEX. Title ▶ DO NOT FILE. Date ▶

Form **W-3 Transmittal of Wage and Tax Statements** **2018**

Department of the Treasury
Internal Revenue Service

DO NOT FILE

YOUR FEDERAL W-2 & W-3 DATA IS FILED ELECTRONICALLY

DO NOT STAPLE

Form **1096**
Department of the Treasury
Internal Revenue Service

Annual Summary and Transmittal of U.S. Information Returns

OMB No. 1545-0108

2019

AGGIES ANGELS CARE PROVIDERS

14475 ROBINS DR
DENVER CO 80239

Name of person to contact	Telephone number	For Official Use Only
LATTANY DEJANE	(720) 318-0173	
E-mail address	Fax Number ( )	

1 Employer identification number	2 Social security number	3 Total number of forms	4 Federal income tax withheld	5 Total amount reported with this Form 1096
80-0438877		9	$	$ 76811.50

6 Enter an "X" in only one box below to indicate the type of form being filed. 7 Form 1099-MISC with NEC in box 7, check ... ▶ X

W-2G 32	1097-BTC 50	1098 81	1098-C 78	1098-E 84	1098-F 03	1098-Q 74	1098-T 83	1099-A 80	1099-B 79	1099-C 85	1099-CAP 73	1099-DIV 91	1099-G 86	1099-INT 92	1099-K 10	1099-LS 16
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

1099-LTC 93	1099-MISC 95	1099-OID 96	1099-PATR 97	1099-Q 31	1099-QA 1A	1099-R 98	1099-S 75	1099-SA 94	1099-SB 43	3921 25	3922 26	5498 28	5498-ESA 72	5498-QA 2A	5498-SA 27	
☐	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

REFERENCE COPY PREPARED BY PAYCHEX. DO NOT FILE.

Signature ▶ ..... **Title ▶** ..... **Date ▶** .....

DO NOT FILE

YOUR FEDERAL 1099 & 1096 DATA

IS FILED ELECTRONICALLY

DO NOT STAPLE

Form **1096**
Department of the Treasury
Internal Revenue Service

Annual Summary and Transmittal of U.S. Information Returns

OMB No. 1545-0108

2019

AGGIES ANGELS CARE PROVIDERS

14475 ROBINS DR
DENVER CO 80239

Name of person to contact	Telephone number
LATTANY DEJANE	(720) 318-0173
E-mail address	Fax Number ( )

For Official Use Only

1 Employer identification number	2 Social security number	3 Total number of forms	4 Federal income tax withheld	5 Total amount reported with this Form 1096
80-0438877		9	$	$ 76811.50

6 Enter an "X" in only one box below to indicate the type of form being filed. 7 Form 1099-MISC with NEC in box 7, check ... ▶ X

W-2G 32	1097-BTC 50	1098 81	1098-C 78	1098-E 84	1098-F 03	1098-Q 74	1098-T 83	1099-A 80	1099-B 79	1099-C 85	1099-CAP 73	1099-DIV 91	1099-G 86	1099-INT 92	1099-K 10	1099-LS 16
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

1099-LTC 93	1099-MISC 95	1099-OID 96	1099-PATR 97	1099-Q 31	1099-QA 1A	1099-R 98	1099-S 75	1099-SA 94	1099-SB 43	3921 25	3922 26	5498 28	5498-ESA 72	5498-QA 2A	5498-SA 27	
☐	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

REFERENCE COPY PREPARED BY PAYCHEX. DO NOT FILE.

Signature ▶ ..... **Title ▶** ..... **Date ▶** .....

DO NOT FILE

YOUR FEDERAL 1099 & 1096 DATA

IS FILED ELECTRONICALLY

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-87-9194	0095-13058390 - 15 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
ZIPPORAH ARRINGTON

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 20891.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 20891.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	524-02-5323	0095-13058390 - 48 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 19656.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 19656.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	524-31-9402	0095-13058390 - 49 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308

AURORA CO 80014

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 10488.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 10488.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-91-1626	0095-13058390 - 53 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
MATTHEW HOGAN

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 2016.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/30941838	$ 2016.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-95-1873	0095-13058390 - 26 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6** Medical and health care payments	**7** Nonemployee compensation	**8** Substitute payments in lieu of dividends or interest
$	$	$ 13661.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10** Crop insurance proceeds	**11** / **12**	**13** Excess golden parachute payments / **14** Gross proceeds paid to an attorney
	$		$ / $
15a Section 409A deferrals / **15b** Section 409A income	**16** State tax withheld	**17** State/Payer's state no.	**18** State income
$ / $	$	CO/0941838	$ 13661.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	521-83-7462	0095-13058390 - 18 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DEVIN MOORE

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6** Medical and health care payments	**7** Nonemployee compensation	**8** Substitute payments in lieu of dividends or interest
$	$	$ 360.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10** Crop insurance proceeds	**11** / **12**	**13** Excess golden parachute payments / **14** Gross proceeds paid to an attorney
	$		$ / $
15a Section 409A deferrals / **15b** Section 409A income	**16** State tax withheld	**17** State/Payer's state no.	**18** State income
$ / $	$	CO/0941838	$ 360.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	449-25-6930	0095-13058390 - 25 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6** Medical and health care payments	**7** Nonemployee compensation	**8** Substitute payments in lieu of dividends or interest
$	$	$ 5496.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10** Crop insurance proceeds	**11** / **12**	**13** Excess golden parachute payments / **14** Gross proceeds paid to an attorney
	$		$ / $
15a Section 409A deferrals / **15b** Section 409A income	**16** State tax withheld	**17** State/Payer's state no.	**18** State income
$ / $	$	CO/0941838	$ 5496.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	524-06-0245	0095-13058390 - 54 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6** Medical and health care payments	**7** Nonemployee compensation	**8** Substitute payments in lieu of dividends or interest
$	$	$ 207.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10** Crop insurance proceeds	**11** / **12**	**13** Excess golden parachute payments / **14** Gross proceeds paid to an attorney
	$		$ / $
15a Section 409A deferrals / **15b** Section 409A income	**16** State tax withheld	**17** State/Payer's state no.	**18** State income
$ / $	$	CO/30941838	$ 207.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
2019	80-0438877	523-02-5656	0095-13058390 - 66 20008	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	SHERRONDA WRIGHT 2990 TUANHOE ST DENVER CO 80207	For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $ 0.00	2 Royalties $ 0.00	3 Other Income $ 0.00	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $ 4036.50	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/0941838	18 State income $ 4036.50

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-87-9194	0095-13058390 - 15 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
ZIPPORAH ARRINGTON

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 20891.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 20891.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	- -	0095-13058390 - 48 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 19656.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 19656.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	524-31-9402	0095-13058390 - 49 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308

AURORA CO 80014

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 10488.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 10488.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form 1099-MISC MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-91-1626	0095-13058390 - 53 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
MATTHEW HOGAN

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 2016.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/30941838	$ 2016.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	522-95-1873	0095-13058390 - 26 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 13661.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 13661.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	521-83-7462	0095-13058390 - 18 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DEVIN MOORE

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 360.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 360.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	449-25-6930	0095-13058390 - 25 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 5496.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/0941838	$ 5496.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR 2019	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
	80-0438877	524-06-0245	0095-13058390 - 54 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$ 0.00	$ 0.00	$ 0.00	$
5 Fishing boat proceeds	**6 Medical and health care payments**	**7 Nonemployee compensation**	**8 Substitute payments in lieu of dividends or interest**
$	$	$ 207.00	$
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	**10 Crop insurance proceeds**	**11** / **12**	**13 Excess golden parachute payments** / **14 Gross proceeds paid to an attorney**
	$		$ / $
15a Section 409A deferrals / **15b Section 409A income**	**16 State tax withheld**	**17 State/Payer's state no.**	**18 State income**
$ / $	$	CO/30941838	$ 207.00

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
2019	80-0438877	523-02-5656	0095-13058390 - 66 20001	☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	SHERRONDA WRIGHT 2990 TUANHOE ST DENVER CO 80207	For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $ 0.00	2 Royalties $ 0.00	3 Other Income $ 0.00	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $ 4036.50	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/0941838	18 State income $ 4036.50

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Form **1099-MISC** MISCELLANEOUS INCOME 16-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement	2nd TIN Not.
				☐	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code.	COPY C, FOR PAYER
		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.

1 Rents $	2 Royalties $	3 Other Income $	4 Federal income tax withheld $
5 Fishing boat proceeds $	6 Medical and health care payments $	7 Nonemployee compensation $	8 Substitute payments in lieu of dividends or interest $
9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $	11 / 12	13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-87-9194	0095-13058390 - 15 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 20891.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-87-9194	0095-13058390 - 15 20008	☐

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14475 ROBINS DR
DENVER CO 80239

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ZIPPORAH ARRINGTON

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 20891.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $20,891.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-87-9194	0095-13058390 - 15 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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ZIPPORAH ARRINGTON

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 20891.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

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Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

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Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-87-9194	0095-13058390 - 15 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **20891.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$20,891.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-02-5323	0095-13058390 - 48 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **19656.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-02-5323	0095-13058390 - 48 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **19656.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$19,656.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-02-5323	0095-13058390 - 48 20008	☐

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DENVER CO 80239

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Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-02-5323	0095-13058390 - 48 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 19656.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ 19,656.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308
AURORA CO 80014

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308
AURORA CO 80014

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$10,488.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308
AURORA CO 80014

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

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Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	CHANTEL ELLISON 1925 S VAUGHN WAY APT 308 AURORA CO 80014	

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838** / 18 State income $ **$10,488.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

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				☐

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
MATTHEW HOGAN

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20008	☐

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$	$	$	$
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$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $2,016.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20008	☐

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$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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MATTHEW HOGAN

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $2,016.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-95-1873	0095-13058390 - 26 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **13661.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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2019	80-0438877	522-95-1873	0095-13058390 - 26 20008	☐

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-95-1873	0095-13058390 - 26 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 13661.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $13,661.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20008	☐

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $360.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
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$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

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Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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DEVIN MOORE

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1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
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$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	449-25-6930	0095-13058390 - 25 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5496.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	449-25-6930	0095-13058390 - 25 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5496.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $5,496.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	449-25-6930	0095-13058390 - 25 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
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15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	449-25-6930	0095-13058390 - 25 20008	☐

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DENVER CO 80239

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

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Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

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Box 6. For individuals, report on Schedule C (Form 1040).

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-06-0245	0095-13058390 - 54 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **207.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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2019	80-0438877	524-06-0245	0095-13058390 - 54 20008	☐

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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
SHERRONDA WRIGHT
2990 TUANHOE ST
DENVER CO 80207

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20008	☐

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $4,036.50

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20008	☐

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
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2990 TUANHOE ST
DENVER CO 80207

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$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

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Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

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Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20008	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	SHERRONDA WRIGHT 2990 TUANHOE ST DENVER CO 80207	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**	
$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$ 4036.50	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $	14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ 4,036.50

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	
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$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $	14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	
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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-87-9194	0095-13058390 - 15 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 20891.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
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9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $20,891.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

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Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-87-9194	0095-13058390 - 15 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 20891.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $20,891.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	- -	0095-13058390 - 48 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **19656.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	- -	0095-13058390 - 48 20001	☐

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15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$19,656.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	- -	0095-13058390 - 48 20001	☐

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14475 ROBINS DR
DENVER CO 80239

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	- -	0095-13058390 - 48 20001	☐

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Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308
AURORA CO 80014

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$10,488.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
CHANTEL ELLISON
1925 S VAUGHN WAY APT 308
AURORA CO 80014

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-31-9402	0095-13058390 - 49 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	CHANTEL ELLISON 1925 S VAUGHN WAY APT 308 AURORA CO 80014	

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **10488.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$10,488.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

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$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

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Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
MATTHEW HOGAN

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $2,016.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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14475 ROBINS DR
DENVER CO 80239

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$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 2016.00	$
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Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-91-1626	0095-13058390 - 53 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
MATTHEW HOGAN

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 2016.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $2,016.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-95-1873	0095-13058390 - 26 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **13661.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-95-1873	0095-13058390 - 26 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **13661.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$13,661.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-95-1873	0095-13058390 - 26 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
TENEA T LATTANY
4699 KITTRIDGE
DENVER CO 80239

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **13661.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	522-95-1873	0095-13058390 - 26 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	TENEA T LATTANY 4699 KITTRIDGE DENVER CO 80239	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**	
$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$ 13661.00	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $	14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ 13,661.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	
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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**	
$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $	14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code	
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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**	
$	$	$	$	
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
$	$	$	$	
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $	14 Gross proceeds paid to an attorney $
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Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

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Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEVIN MOORE

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
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$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $360.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20001	☐

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$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	521-83-7462	0095-13058390 - 18 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

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DEVIN MOORE

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1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 360.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $360.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	449-25-6930	0095-13058390 - 25 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5496.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

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CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	449-25-6930	0095-13058390 - 25 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DEMETRIA D SKIPPER
4155 E IOWA # 103
DENVER CO 80222

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 5496.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ 5,496.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-06-0245	0095-13058390 - 54 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **207.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-06-0245	0095-13058390 - 54 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

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1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **207.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. **CO/30941838**	18 State income $ **$207.00**

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-06-0245	0095-13058390 - 54 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalities	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ **207.00**	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	524-06-0245	0095-13058390 - 54 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
DAMON WHITE
15070 E 55TH AVE
DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 207.00	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ $207.00

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

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$	$	$	$
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Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $ / 15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Instructions for Recipient

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Account number. May show an account or other unique number the payer assigned to distinguish your account.

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Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

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Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

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Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
SHERRONDA WRIGHT
2990 TUANHOE ST
DENVER CO 80207

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. / 18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED COPY B, FOR RECIPIENT

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
SHERRONDA WRIGHT
2990 TUANHOE ST
DENVER CO 80207

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838 / 18 State income $ $4,036.50

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
SHERRONDA WRIGHT
2990 TUANHOE ST
DENVER CO 80207

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	**4 Federal income tax withheld**
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. / 18 State income $

Instructions for Recipient

Recipient's taxpayer identification number(TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions to Form 8938.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is $400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If you are still receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES(NR)). Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties, copyrights, and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the box 7 instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box are SE income, report it on Schedule C or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040 (or Form 1040NR). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line of Schedule 1(Form 1040) (or Form 1040NR).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040) (or Form 1040NR).

Box 9. If checked, $5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 10. Report this amount on Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 (or Form 1040NR) instructions for where to report.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A, plus any earnings on current and prior year deferrals.

Box 15b. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040 (or Form 1040NR) . See the Form 1040 (or Form 1040NR) instructions.

Boxes 16–18. Shows state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099misc.*

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☐ VOID ☐ CORRECTED TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
2019	80-0438877	523-02-5656	0095-13058390 - 66 20001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.
AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code
SHERRONDA WRIGHT
2990 TUANHOE ST
DENVER CO 80207

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$ 4036.50	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no. CO/30941838	18 State income $ 4,036.50

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

Form **1099 - MISC** MISCELLANEOUS INCOME 46-033 1690 ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing requirement
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country and ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Rents	2 Royalties	3 Other Income	4 Federal income tax withheld
$	$	$	$
5 Fishing boat proceeds	6 Medical and health care payments	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
$	$	$	$
9 Payer made direct sales of $5000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $		13 Excess golden parachute payments $ / 14 Gross proceeds paid to an attorney $
15a Section 409A deferrals $	15b Section 409A income $	16 State tax withheld $	17 State/Payer's state no.	18 State income $

0095-13058390

Form **940 for 2019:** **Employer's Annual Federal Unemployment (FUTA) Tax Return**
Department of the Treasury - Internal Revenue Service

850113

OMB No. 1545-0028

Employer identification number (EIN): 80-0438877

Name *(not your trade name)*: AGGIES ANGELS CARE PROVIDERS

Trade name *(if any)*:

Address: 14475 ROBINS DR
Number Street | Suite or room number

DENVER | CO | 80239
City | State | ZIP code

Foreign country name | Foreign province/county | Foreign postal code

Type of Return (Check all that apply.)

- ☐ **a.** Amended
- ☐ **b.** Successor employer
- ☐ **c.** No payments to employees in 2019
- ☐ **d.** Final: Business closed or stopped paying wages

Go to *www.irs.gov/form940* for instructions and the latest information.

Read the separate instructions before you complete this form. Please type or print within the boxes.

Part 1: Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1.

1a **If you had to pay state unemployment tax in one state only, enter the state abbreviation** . . . 1a CO
Check Here

1b **If you had to pay state unemployment tax in more than one state, you are a multi-state employer** . . . 1b ☐ Complete Schedule A (Form 940).

2 **If you paid wages in a state that is subject to CREDIT REDUCTION** . . . 2 ☐ Check here. Complete Schedule A (Form 940).

Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank.

3 **Total payments to all employees** . . . 3 155401.30

4 **Payments exempt from FUTA tax** . . . 4 .

Check all that apply: 4a ☐ Fringe benefits; 4b ☐ Group-term life insurance; 4c ☐ Retirement/Pension; 4d ☐ Dependent care; 4e ☐ Other

5 **Total of payments made to each employee in excess of $7,000** . . . 5 27900.00

6 **Subtotal** (line 4 + line 5 = line 6) . . . 6 27900.00

7 **Total taxable FUTA wages** (line 3 - line 6 = line 7) (see instructions) . . . 7 127501.30

8 **FUTA tax before adjustments** (line 7 x 0.006 = line 8) . . . 8 765.01

Part 3: Determine your adjustments. If any line does NOT apply, leave it blank.

9 **If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054** (line 7 x 0.054 = line 9). Go to line 12 . . . 9 .

10 **If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late** (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . . . 10 .

11 **If credit reduction applies,** enter the total from Schedule A (Form 940) . . . 11 .

Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank.

12 **Total FUTA tax after adjustments** (lines 8 + 9 + 10 + 11 = line 12) . . . 12 765.01

13 **FUTA tax deposited for the year, including any overpayment applied from a prior year** . . . 13 765.01

14 **Balance due** If line 12 is more than line 13, enter the excess on line 14.
- If line 14 is more than $500, you must deposit your tax.
- If line 14 is $500 or less, you may pay with this return. See instructions . . . 14 .

15 **Overpayment** If line 13 is more than line 12, enter the excess on line 15 and check a box below . . . 15 .

► You **MUST** complete both pages of this form and **SIGN** it. Check one: ☐ Apply to next return. ☐ Send a refund.

Next ➡

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 11234O Form **940** (2019)

850212

Name *(not your trade name)* AGGIES ANGELS CARE PROVIDERS

Employer identification number (EIN) 80-0438877

Part 5: Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.

16 **Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.**

16a **1st quarter** (January 1 - March 31)	16a	191.59
16b **2nd quarter** (April 1 - June 30)	16b	228.88
16c **3rd quarter** (July 1 - September 30)	16c	187.93
16d **4th quarter** (October 1 - December 31)	16d	156.61
17 **Total tax liability for the year** (line 16a + 16b + 16c + 16d = line 17)	17	765.01

Total must equal line 12.

Part 6: May we speak with your third-party designee?

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☐ **Yes.** Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS ☐☐☐☐☐

☐ **No.**

Part 7: Sign here. You MUST complete both pages of this form and SIGN it.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X **Sign your name here**

Print your name here REFERENCE COPY PREPARED

Print your title here BY PAYCHEX. DO NOT FILE

Date

Best daytime phone

Paid preparer use only

Check if you are self-employed ☐

Preparer's name PTIN

Preparer's signature Date / /

Firm's name (or yours if self-employed) EIN

Address Phone ( ) -

City State ZIP code

0095-13058390

Form **940 for 2019:** **Employer's Annual Federal Unemployment (FUTA) Tax Return**
Department of the Treasury - Internal Revenue Service

850113

OMB No. 1545-0028

Employer identification number (EIN): 80-0438877

Name *(not your trade name)*: AGGIES ANGELS CARE PROVIDERS

Trade name *(if any)*:

Address: 14475 ROBINS DR
Number Street | Suite or room number

DENVER | CO | 80239
City | State | ZIP code

Foreign country name | Foreign province/county | Foreign postal code

Type of Return (Check all that apply.)

- ☐ **a.** Amended
- ☐ **b.** Successor employer
- ☐ **c.** No payments to employees in 2019
- ☐ **d.** Final: Business closed or stopped paying wages

Go to *www.irs.gov/form940* for instructions and the latest information.

Read the separate instructions before you complete this form. Please type or print within the boxes.

Part 1: Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1.

1a **If you had to pay state unemployment tax in one state only, enter the state abbreviation** . . . 1a CO
Check Here

1b **If you had to pay state unemployment tax in more than one state, you are a multi-state employer** . . . 1b ☐ Complete Schedule A (Form 940).

2 **If you paid wages in a state that is subject to CREDIT REDUCTION** . . . 2 ☐ Check here. Complete Schedule A (Form 940).

Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank.

3 **Total payments to all employees** . . . 3 155401.30

4 **Payments exempt from FUTA tax** . . . 4

Check all that apply: 4a ☐ Fringe benefits; 4b ☐ Group-term life insurance; 4c ☐ Retirement/Pension; 4d ☐ Dependent care; 4e ☐ Other

5 **Total of payments made to each employee in excess of $7,000** . . . 5 27900.00

6 **Subtotal** (line 4 + line 5 = line 6) . . . 6 27900.00

7 **Total taxable FUTA wages** (line 3 - line 6 = line 7) (see instructions) . . . 7 127501.30

8 **FUTA tax before adjustments** (line 7 x 0.006 = line 8) . . . 8 765.01

Part 3: Determine your adjustments. If any line does NOT apply, leave it blank.

9 **If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054** (line 7 x 0.054 = line 9). Go to line 12 . . . 9

10 **If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late** (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . . . 10

11 **If credit reduction applies,** enter the total from Schedule A (Form 940) . . . 11

Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank.

12 **Total FUTA tax after adjustments** (lines 8 + 9 + 10 + 11 = line 12) . . . 12 765.01

13 **FUTA tax deposited for the year, including any overpayment applied from a prior year** . . . 13 765.01

14 **Balance due** If line 12 is more than line 13, enter the excess on line 14.
- If line 14 is more than $500, you must deposit your tax.
- If line 14 is $500 or less, you may pay with this return. See instructions . . . 14

15 **Overpayment** If line 13 is more than line 12, enter the excess on line 15 and check a box below . . . 15

► You **MUST** complete both pages of this form and **SIGN** it. Check one: ☐ Apply to next return. ☐ Send a refund.

Next ➡

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 11234O Form **940** (2019)

850212

Name *(not your trade name)* AGGIES ANGELS CARE PROVIDERS

Employer identification number (EIN) 80-0438877

Part 5: Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.

16 **Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.**

16a **1st quarter** (January 1 - March 31)	16a	191.59
16b **2nd quarter** (April 1 - June 30)	16b	228.88
16c **3rd quarter** (July 1 - September 30)	16c	187.93
16d **4th quarter** (October 1 - December 31)	16d	156.61
17 **Total tax liability for the year** (line 16a + 16b + 16c + 16d = line 17)	17	765.01

Total must equal line 12.

Part 6: May we speak with your third-party designee?

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☐ **Yes.** Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS ☐☐☐☐☐

☐ **No.**

Part 7: Sign here. You MUST complete both pages of this form and SIGN it.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X **Sign your name here**

Print your name here REFERENCE COPY PREPARED

Print your title here BY PAYCHEX. DO NOT FILE

Date

Best daytime phone

Paid preparer use only

Check if you are self-employed ☐

Preparer's name PTIN

Preparer's signature Date / /

Firm's name (or yours if self-employed) EIN

Address Phone ( ) -

City State ZIP code

Departmental Use Only

DR 1093 (06/28/16)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0009
www.TaxColorado.com

Colorado Department of Revenue
Annual Transmittal of State W-2 Forms

161093 11124

SSN 1		SSN 2	
FEIN		Account Number	
80-0438877		30941838	
Last Name or Business Name		First Name	Middle Initial
AGGIES ANGELS CARE PROVIDERS			
Address			
14475 ROBINS DR			
City	State	ZIP	
DENVER	CO	80239	
Period (MM/YY - MM/YY)		Due Date (MM/DD/YY)	
01/19 - 12/19		01/31/20	
Number of W-2s Attached		Phone Number	
35		( )	

Mark here if this is an Amended Return ● ☐ Paid by EFT ☐

1000-130

1. Total Colorado income taxes withheld per W-2 forms attached.		3358	00
2. Total Colorado income taxes remitted for the period indicated above.	(890)	3358	00
3. A. **Balance Due** If line 1 is more than line 2, enter difference and (see instructions)	(100)	0	00
B. **Overpayment** If line 2 is more than line 1, enter the difference and (see instructions)	(415)	0	00
4. **Penalty** (see instructions)	(200)		
5. **Interest** (see instructions)	(300)		
6. **Additional Balance Paid** Add lines 3A, 4, and 5	(355)	$ 0.00	

The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.

Mail reconciliation with W-2 forms and any payment due on line 6 to: Colorado Department of Revenue, Denver, CO 80261-0009

Signed under penalty of perjury in the second degree.

Signature

REFERENCE COPY PREPARED BY PAYCHEX DO NOT FILE

Date (MM/DD/YY)

0095-13058390 20008 TAXPAY®

```
****************************************
*           CLIENT  13058390           *
*                                      *
*  THESE ARE YOUR W2 REFERENCE COPIES.  *
*  KEEP THESE COPIES FOR 4 YEARS.       *
*  DO NOT DISTRIBUTE TO YOUR EMPLOYEES. *
****************************************
```

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000067-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 509-72-0548
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
260.00	10.17
3 Social security wages	4 Social security tax withheld
260.00	16.12
5 Medicare wages and tips	6 Medicare tax withheld
260.00	3.77
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	260.00	5.00	260.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000050-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SANDRA BRADLEY	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
427.00	
3 Social security wages	4 Social security tax withheld
427.00	26.47
5 Medicare wages and tips	6 Medicare tax withheld
427.00	6.19
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	427.00		427.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000062-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 513-78-1439
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code YALANDA BROOKS 363 GENEVA STREET #A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1452.00	97.71
3 Social security wages	4 Social security tax withheld
1452.00	90.02
5 Medicare wages and tips	6 Medicare tax withheld
1452.00	21.05
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1452.00	46.00	1452.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000060-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ELAINE BURTON 4403 FLANDERS ST DENVER CO 80249	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
3422.50	215.61
3 Social security wages	4 Social security tax withheld
3422.50	212.20
5 Medicare wages and tips	6 Medicare tax withheld
3422.50	49.63
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3422.50	97.00	3422.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000041-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-11-6922
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ANNETTE CARLISLE 4055 ALBION ST DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 2774.20	2 Federal income tax withheld
3 Social security wages 2774.20	4 Social security tax withheld 172.00
5 Medicare wages and tips 2774.20	6 Medicare tax withheld 40.23
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2774.20	3.00	2774.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000024-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-86-3393
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5184.00	2 Federal income tax withheld
3 Social security wages 5184.00	4 Social security tax withheld 321.41
5 Medicare wages and tips 5184.00	6 Medicare tax withheld 75.17
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5184.00		5184.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000004-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-08-1995
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 7584.00	2 Federal income tax withheld
3 Social security wages 7584.00	4 Social security tax withheld 470.21
5 Medicare wages and tips 7584.00	6 Medicare tax withheld 109.97
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	7584.00	168.00	7584.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000057-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 352-64-3902
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code AYANNA COOK 1100 DALLAS ST AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 442.00	2 Federal income tax withheld 12.54
3 Social security wages 442.00	4 Social security tax withheld 27.40
5 Medicare wages and tips 442.00	6 Medicare tax withheld 6.41
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	442.00	6.00	442.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000045-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 207.00	2 Federal income tax withheld 4.87
3 Social security wages 207.00	4 Social security tax withheld 12.83
5 Medicare wages and tips 207.00	6 Medicare tax withheld 3.00
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	207.00	5.00	207.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000061-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 652-18-9173
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ELIJAH J DURANT 3311 CHASE ST WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3996.00	2 Federal income tax withheld 257.13
3 Social security wages 3996.00	4 Social security tax withheld 247.75
5 Medicare wages and tips 3996.00	6 Medicare tax withheld 57.94
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3996.00	117.00	3996.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000006-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-87-3130
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code MIRNA FLORES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 8226.00	2 Federal income tax withheld 58.74
3 Social security wages 8226.00	4 Social security tax withheld 510.01
5 Medicare wages and tips 8226.00	6 Medicare tax withheld 119.28
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8226.00	27.00	8226.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000036-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 562-33-6426
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JOHN GIVENS 1155 S HAVANA ST # 396 AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 268.80	2 Federal income tax withheld 11.05
3 Social security wages 268.80	4 Social security tax withheld 16.67
5 Medicare wages and tips 268.80	6 Medicare tax withheld 3.90
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	268.80	8.00	268.80	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000019-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-13-8337
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 4806.30	2 Federal income tax withheld 290.67
3 Social security wages 4806.30	4 Social security tax withheld 297.99
5 Medicare wages and tips 4806.30	6 Medicare tax withheld 69.69
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4806.30	140.00	4806.30	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000055-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-19-2891
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 4560.00	2 Federal income tax withheld 297.70
3 Social security wages 4560.00	4 Social security tax withheld 282.72
5 Medicare wages and tips 4560.00	6 Medicare tax withheld 66.12
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4560.00	140.00	4560.00	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000056-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 652-12-0504
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 10500.00	2 Federal income tax withheld 728.67
3 Social security wages 10500.00	4 Social security tax withheld 651.00
5 Medicare wages and tips 10500.00	6 Medicare tax withheld 152.25
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	10500.00	337.00	10500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000064-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 514-15-1774
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 2808.00	2 Federal income tax withheld 185.82
3 Social security wages 2808.00	4 Social security tax withheld 174.10
5 Medicare wages and tips 2808.00	6 Medicare tax withheld 40.72
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2808.00	87.00	2808.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000007-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-77-9492
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 9680.00	2 Federal income tax withheld 702.89
3 Social security wages 9680.00	4 Social security tax withheld 600.16
5 Medicare wages and tips 9680.00	6 Medicare tax withheld 140.36
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9680.00	280.00	9680.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000014-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-95-1873
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 12376.00	2 Federal income tax withheld 624.01
3 Social security wages 12376.00	4 Social security tax withheld 767.31
5 Medicare wages and tips 12376.00	6 Medicare tax withheld 179.45
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12376.00	281.00	12376.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000027-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-27-0712
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code MICHAEL LEE 146 S EAGLE CIRCLE AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 924.00	2 Federal income tax withheld 62.80
3 Social security wages 924.00	4 Social security tax withheld 57.29
5 Medicare wages and tips 924.00	6 Medicare tax withheld 13.40
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	924.00	31.00	924.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000021-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-88-9226
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5304.00	2 Federal income tax withheld 340.44
3 Social security wages 5304.00	4 Social security tax withheld 328.85
5 Medicare wages and tips 5304.00	6 Medicare tax withheld 76.91
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5304.00	158.00	5304.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000046-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0029
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5760.00	2 Federal income tax withheld 196.08
3 Social security wages 5760.00	4 Social security tax withheld 357.12
5 Medicare wages and tips 5760.00	6 Medicare tax withheld 83.52
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5760.00	102.00	5760.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000040-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 422-96-3729
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code BETTY MOORE 4463 STEEL STREET DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 8116.00	2 Federal income tax withheld 510.87
3 Social security wages 8116.00	4 Social security tax withheld 503.19
5 Medicare wages and tips 8116.00	6 Medicare tax withheld 117.68
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8116.00	239.00	8116.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000011-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-83-7462
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEVIN MOORE	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 477.30	2 Federal income tax withheld
3 Social security wages 477.30	4 Social security tax withheld 29.59
5 Medicare wages and tips 477.30	6 Medicare tax withheld 6.92
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	477.30	13.00	477.30	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000059-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-65-8755
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SADAYA MOORE 14201 E 1ST DR APT 306 AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 324.00	2 Federal income tax withheld 0.97
3 Social security wages 324.00	4 Social security tax withheld 20.09
5 Medicare wages and tips 324.00	6 Medicare tax withheld 4.70
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	324.00		324.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000042-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 13286.00	2 Federal income tax withheld 984.97
3 Social security wages 13286.00	4 Social security tax withheld 823.73
5 Medicare wages and tips 13286.00	6 Medicare tax withheld 192.65
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13286.00	439.00	13286.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000052-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-47-0739
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5774.00	2 Federal income tax withheld 350.44
3 Social security wages 5774.00	4 Social security tax withheld 357.99
5 Medicare wages and tips 5774.00	6 Medicare tax withheld 83.72
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5774.00	166.00	5774.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000063-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-55-8220
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ROSHAD SMITH 4463 STEELE ST DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 2072.00	2 Federal income tax withheld 128.05
3 Social security wages 2072.00	4 Social security tax withheld 128.46
5 Medicare wages and tips 2072.00	6 Medicare tax withheld 30.04
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2072.00	60.00	2072.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000034-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-14-8141
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code NYOMI ISIS TURPIN 11815 EAST CANAL DR AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 224.00	2 Federal income tax withheld 6.57
3 Social security wages 224.00	4 Social security tax withheld 13.89
5 Medicare wages and tips 224.00	6 Medicare tax withheld 3.25
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	224.00	3.00	224.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000022-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4047
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3126.50	2 Federal income tax withheld
3 Social security wages 3126.50	4 Social security tax withheld 193.84
5 Medicare wages and tips 3126.50	6 Medicare tax withheld 45.33
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3126.50		3126.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000038-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-61-7950
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEREK WASHINGTON 23771 E ALABAMA DR AURORA CO 80018	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 11592.00	2 Federal income tax withheld 779.28
3 Social security wages 11592.00	4 Social security tax withheld 718.70
5 Medicare wages and tips 11592.00	6 Medicare tax withheld 168.08
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	11592.00	366.00	11592.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000051-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-06-0245
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DAMON WHITE 15070 E 55TH AVE DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 1656.00	2 Federal income tax withheld 38.96
3 Social security wages 1656.00	4 Social security tax withheld 102.67
5 Medicare wages and tips 1656.00	6 Medicare tax withheld 24.01
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1656.00	22.00	1656.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000058-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JOYCE WILLIAMS	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 420.00	2 Federal income tax withheld 26.17
3 Social security wages 420.00	4 Social security tax withheld 26.04
5 Medicare wages and tips 420.00	6 Medicare tax withheld 6.09
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	420.00	12.00	420.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20008

d Control number 0095-13058390 0000000001-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 465-79-8669
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code NATALIE M WILLIAMS 2102 M L K BLVD DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 1164.30	2 Federal income tax withheld
3 Social security wages 1164.30	4 Social security tax withheld 72.19
5 Medicare wages and tips 1164.30	6 Medicare tax withheld 16.88
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1164.30		1164.30	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000009-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 510-76-6414
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 9540.00	2 Federal income tax withheld
3 Social security wages 9540.00	4 Social security tax withheld 591.48
5 Medicare wages and tips 9540.00	6 Medicare tax withheld 138.33
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9540.00		9540.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000003-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-04-1936
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code CHERYL R WOODSON 1775 W MOSIER PLACE #1209 DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 6667.40	2 Federal income tax withheld
3 Social security wages 6667.40	4 Social security tax withheld 413.38
5 Medicare wages and tips 6667.40	6 Medicare tax withheld 96.68
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6667.40				

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal X	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 155401.30	2 Federal income tax withheld 6923.18
3 Social security wages 155401.30	4 Social security tax withheld 9634.87
5 Medicare wages and tips 155401.30	6 Medicare tax withheld 2253.32
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	155401.30	3358.00	148733.90	398.00	CO AUROR

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*           CLIENT  13058390           *
*                                      *
*  THESE ARE YOUR W2 REFERENCE COPIES.  *
*  KEEP THESE COPIES FOR 4 YEARS.       *
*  DO NOT DISTRIBUTE TO YOUR EMPLOYEES. *
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Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000067-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 509-72-0548
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
260.00	10.17
3 Social security wages	4 Social security tax withheld
260.00	16.12
5 Medicare wages and tips	6 Medicare tax withheld
260.00	3.77
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	260.00	5.00	260.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000050-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SANDRA BRADLEY	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
427.00	
3 Social security wages	4 Social security tax withheld
427.00	26.47
5 Medicare wages and tips	6 Medicare tax withheld
427.00	6.19
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	427.00		427.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000062-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 513-78-1439
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code YALANDA BROOKS 363 GENEVA STREET #A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
1452.00	97.71
3 Social security wages	4 Social security tax withheld
1452.00	90.02
5 Medicare wages and tips	6 Medicare tax withheld
1452.00	21.05
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1452.00	46.00	1452.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000060-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ELAINE BURTON 4403 FLANDERS ST DENVER CO 80249	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
3422.50	215.61
3 Social security wages	4 Social security tax withheld
3422.50	212.20
5 Medicare wages and tips	6 Medicare tax withheld
3422.50	49.63
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3422.50	97.00	3422.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000041-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-11-6922
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ANNETTE CARLISLE 4055 ALBION ST DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 2774.20	2 Federal income tax withheld
3 Social security wages 2774.20	4 Social security tax withheld 172.00
5 Medicare wages and tips 2774.20	6 Medicare tax withheld 40.23
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2774.20	3.00	2774.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000024-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-86-3393
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5184.00	2 Federal income tax withheld
3 Social security wages 5184.00	4 Social security tax withheld 321.41
5 Medicare wages and tips 5184.00	6 Medicare tax withheld 75.17
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5184.00		5184.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000004-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-08-1995
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 7584.00	2 Federal income tax withheld
3 Social security wages 7584.00	4 Social security tax withheld 470.21
5 Medicare wages and tips 7584.00	6 Medicare tax withheld 109.97
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	7584.00	168.00	7584.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000057-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 352-64-3902
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code AYANNA COOK 1100 DALLAS ST AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 442.00	2 Federal income tax withheld 12.54
3 Social security wages 442.00	4 Social security tax withheld 27.40
5 Medicare wages and tips 442.00	6 Medicare tax withheld 6.41
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	442.00	6.00	442.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000045-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 425-45-2124
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 207.00	2 Federal income tax withheld 4.87
3 Social security wages 207.00	4 Social security tax withheld 12.83
5 Medicare wages and tips 207.00	6 Medicare tax withheld 3.00
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	207.00	5.00	207.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000061-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 652-18-9173
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ELIJAH J DURANT 3311 CHASE ST WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3996.00	2 Federal income tax withheld 257.13
3 Social security wages 3996.00	4 Social security tax withheld 247.75
5 Medicare wages and tips 3996.00	6 Medicare tax withheld 57.94
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3996.00	117.00	3996.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000006-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-87-3130
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code MIRNA FLORES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 8226.00	2 Federal income tax withheld 58.74
3 Social security wages 8226.00	4 Social security tax withheld 510.01
5 Medicare wages and tips 8226.00	6 Medicare tax withheld 119.28
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8226.00	27.00	8226.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000036-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 562-33-6426
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JOHN GIVENS 1155 S HAVANA ST # 396 AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 268.80	2 Federal income tax withheld 11.05
3 Social security wages 268.80	4 Social security tax withheld 16.67
5 Medicare wages and tips 268.80	6 Medicare tax withheld 3.90
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	268.80	8.00	268.80	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000019-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-13-8337
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 4806.30	2 Federal income tax withheld 290.67
3 Social security wages 4806.30	4 Social security tax withheld 297.99
5 Medicare wages and tips 4806.30	6 Medicare tax withheld 69.69
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4806.30	140.00	4806.30	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000055-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-19-2891
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 4560.00	2 Federal income tax withheld 297.70
3 Social security wages 4560.00	4 Social security tax withheld 282.72
5 Medicare wages and tips 4560.00	6 Medicare tax withheld 66.12
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4560.00	140.00	4560.00	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000056-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 652-12-0504
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 10500.00	2 Federal income tax withheld 728.67
3 Social security wages 10500.00	4 Social security tax withheld 651.00
5 Medicare wages and tips 10500.00	6 Medicare tax withheld 152.25
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	10500.00	337.00	10500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000064-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 514-15-1774
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 2808.00	2 Federal income tax withheld 185.82
3 Social security wages 2808.00	4 Social security tax withheld 174.10
5 Medicare wages and tips 2808.00	6 Medicare tax withheld 40.72
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2808.00	87.00	2808.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000007-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 523-77-9492		1 Wages, tips, other compensation 9680.00	2 Federal income tax withheld 702.89		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 9680.00	4 Social security tax withheld 600.16		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	5 Medicare wages and tips 9680.00	6 Medicare tax withheld 140.36		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9680.00	280.00	9680.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000014-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 522-95-1873		1 Wages, tips, other compensation 12376.00	2 Federal income tax withheld 624.01		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 12376.00	4 Social security tax withheld 767.31		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	5 Medicare wages and tips 12376.00	6 Medicare tax withheld 179.45		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12376.00	281.00	12376.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000027-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 524-27-0712		1 Wages, tips, other compensation 924.00	2 Federal income tax withheld 62.80		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 924.00	4 Social security tax withheld 57.29		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code MICHAEL LEE 146 S EAGLE CIRCLE AURORA CO 80012	5 Medicare wages and tips 924.00	6 Medicare tax withheld 13.40		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	924.00	31.00	924.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000021-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 524-88-9226		1 Wages, tips, other compensation 5304.00	2 Federal income tax withheld 340.44		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 5304.00	4 Social security tax withheld 328.85		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	5 Medicare wages and tips 5304.00	6 Medicare tax withheld 76.91		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5304.00	158.00	5304.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000046-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0029
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5760.00	2 Federal income tax withheld 196.08
3 Social security wages 5760.00	4 Social security tax withheld 357.12
5 Medicare wages and tips 5760.00	6 Medicare tax withheld 83.52
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5760.00	102.00	5760.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000040-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 422-96-3729
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code BETTY MOORE 4463 STEEL STREET DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 8116.00	2 Federal income tax withheld 510.87
3 Social security wages 8116.00	4 Social security tax withheld 503.19
5 Medicare wages and tips 8116.00	6 Medicare tax withheld 117.68
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8116.00	239.00	8116.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000011-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 521-83-7462
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEVIN MOORE	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 477.30	2 Federal income tax withheld
3 Social security wages 477.30	4 Social security tax withheld 29.59
5 Medicare wages and tips 477.30	6 Medicare tax withheld 6.92
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	477.30	13.00	477.30	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000059-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-65-8755
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SADAYA MOORE 14201 E 1ST DR APT 306 AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 324.00	2 Federal income tax withheld 0.97
3 Social security wages 324.00	4 Social security tax withheld 20.09
5 Medicare wages and tips 324.00	6 Medicare tax withheld 4.70
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	324.00		324.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000042-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275		1 Wages, tips, other compensation 13286.00	2 Federal income tax withheld 984.97	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 13286.00	4 Social security tax withheld 823.73	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code WENDY MORALES	5 Medicare wages and tips 13286.00	6 Medicare tax withheld 192.65	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13286.00	439.00	13286.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000052-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 522-47-0739		1 Wages, tips, other compensation 5774.00	2 Federal income tax withheld 350.44	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 5774.00	4 Social security tax withheld 357.99	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	5 Medicare wages and tips 5774.00	6 Medicare tax withheld 83.72	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5774.00	166.00	5774.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000063-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-55-8220		1 Wages, tips, other compensation 2072.00	2 Federal income tax withheld 128.05	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 2072.00	4 Social security tax withheld 128.46	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ROSHAD SMITH 4463 STEELE ST DENVER CO 80216	5 Medicare wages and tips 2072.00	6 Medicare tax withheld 30.04	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2072.00	60.00	2072.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000034-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 653-14-8141		1 Wages, tips, other compensation 224.00	2 Federal income tax withheld 6.57	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 224.00	4 Social security tax withheld 13.89	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code NYOMI ISIS TURPIN 11815 EAST CANAL DR AURORA CO 80011	5 Medicare wages and tips 224.00	6 Medicare tax withheld 3.25	
			7 Social security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	224.00	3.00	224.00		CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE 20001

d Control number 0095-13058390 0000000022-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4047
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3126.50	2 Federal income tax withheld
3 Social security wages 3126.50	4 Social security tax withheld 193.84
5 Medicare wages and tips 3126.50	6 Medicare tax withheld 45.33
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3126.50		3126.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000038-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEREK WASHINGTON	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 11592.00	2 Federal income tax withheld 779.28
3 Social security wages 11592.00	4 Social security tax withheld 718.70
5 Medicare wages and tips 11592.00	6 Medicare tax withheld 168.08
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	11592.00	366.00	11592.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000051-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-06-0245
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DAMON WHITE 15070 E 55TH AVE DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 1656.00	2 Federal income tax withheld 38.96
3 Social security wages 1656.00	4 Social security tax withheld 102.67
5 Medicare wages and tips 1656.00	6 Medicare tax withheld 24.01
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1656.00	22.00	1656.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0095-13058390 0000000058-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JOYCE WILLIAMS	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 420.00	2 Federal income tax withheld 26.17
3 Social security wages 420.00	4 Social security tax withheld 26.04
5 Medicare wages and tips 420.00	6 Medicare tax withheld 6.09
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	420.00	12.00	420.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 EMPLOYER REFERENCE COPY - DO NOT FILE 20001

d Control number	0095-13058390 0000000001-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	465-79-8669
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	1164.30
2 Federal income tax withheld	
3 Social security wages	1164.30
4 Social security tax withheld	72.19
5 Medicare wages and tips	1164.30
6 Medicare tax withheld	16.88
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	NATALIE M WILLIAMS 2102 M L K BLVD DENVER CO 80205

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1164.30		1164.30	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number	0095-13058390 0000000009-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	510-76-6414
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	9540.00
2 Federal income tax withheld	
3 Social security wages	9540.00
4 Social security tax withheld	591.48
5 Medicare wages and tips	9540.00
6 Medicare tax withheld	138.33
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9540.00		9540.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number	0095-13058390 0000000003-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	522-04-1936
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	6667.40
2 Federal income tax withheld	
3 Social security wages	6667.40
4 Social security tax withheld	413.38
5 Medicare wages and tips	6667.40
6 Medicare tax withheld	96.68
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
14 Other	
e Employee's name, address, and ZIP code	CHERYL R WOODSON 1775 W MOSIER PLACE #1209 DENVER CO 80223

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6667.40				

Form W-2 Wage and Tax Statement 2019 EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number	0095-13058390
Void	
b Employer's identification number	80-0438877
a Employee's social security number	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
1 Wages, tips, other compensation	155401.30
2 Federal income tax withheld	6923.18
3 Social security wages	155401.30
4 Social security tax withheld	9634.87
5 Medicare wages and tips	155401.30
6 Medicare tax withheld	2253.32
7 Social security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	Subtotal: X
14 Other	
e Employee's name, address, and ZIP code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	155401.30	3358.00	148733.90	398.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000067-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 509-72-0548
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SHIRLY ANDERSON, 12565 ALBROOK DR #3701, DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
260.00	10.17
3 Social Security wages	4 Social Security tax withheld
260.00	16.12
5 Medicare wages and tips	6 Medicare tax withheld
260.00	3.77
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	260.00	5.00	260.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000067-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 509-72-0548
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SHIRLY ANDERSON, 12565 ALBROOK DR #3701, DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
260.00	10.17
3 Social Security wages	4 Social Security tax withheld
260.00	16.12
5 Medicare wages and tips	6 Medicare tax withheld
260.00	3.77
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	260.00	5.00	260.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000067-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 509-72-0548
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SHIRLY ANDERSON, 12565 ALBROOK DR #3701, DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
260.00	10.17
3 Social Security wages	4 Social Security tax withheld
260.00	16.12
5 Medicare wages and tips	6 Medicare tax withheld
260.00	3.77
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	260.00	5.00	260.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000067-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 260.00	2 Federal Income tax withheld 10.17
b Employer's identification number 80-0438877	a Employee's social security number 509-72-0548		3 Social Security wages 260.00	4 Social Security tax withheld 16.12
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 260.00	6 Medicare tax withheld 3.77
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	260.00	5.00	260.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you reported to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000050-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 427.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 427.00 — 4 Social Security tax withheld: 26.47
e Employee's name, address, and ZIP code: SANDRA BRADLEY	5 Medicare wages and tips: 427.00 — 6 Medicare tax withheld: 6.19
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	427.00		427.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000050-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 427.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 427.00 — 4 Social Security tax withheld: 26.47
e Employee's name, address, and ZIP code: SANDRA BRADLEY	5 Medicare wages and tips: 427.00 — 6 Medicare tax withheld: 6.19
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	427.00		427.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000050-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 427.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 427.00 — 4 Social Security tax withheld: 26.47
e Employee's name, address, and ZIP code: SANDRA BRADLEY	5 Medicare wages and tips: 427.00 — 6 Medicare tax withheld: 6.19
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	427.00		427.00	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000050-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number:		1 Wages, tips, other compensation: 427.00 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 427.00 / 4 Social Security tax withheld: 26.47
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: SANDRA BRADLEY	5 Medicare wages and tips: 427.00 / 6 Medicare tax withheld: 6.19
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	427.00		427.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000062-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 513-78-1439	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1452.00 — 2 Federal Income tax withheld: 97.71
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1452.00 — 4 Social Security tax withheld: 90.02
e Employee's name, address, and ZIP code: YALANDA BROOKS, 363 GENEVA STREET #A, AURORA CO 80010	5 Medicare wages and tips: 1452.00 — 6 Medicare tax withheld: 21.05
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1452.00	46.00	1452.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000062-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 513-78-1439	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1452.00 — 2 Federal Income tax withheld: 97.71
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1452.00 — 4 Social Security tax withheld: 90.02
e Employee's name, address, and ZIP code: YALANDA BROOKS, 363 GENEVA STREET #A, AURORA CO 80010	5 Medicare wages and tips: 1452.00 — 6 Medicare tax withheld: 21.05
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1452.00	46.00	1452.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000062-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 513-78-1439	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1452.00 — 2 Federal Income tax withheld: 97.71
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1452.00 — 4 Social Security tax withheld: 90.02
e Employee's name, address, and ZIP code: YALANDA BROOKS, 363 GENEVA STREET #A, AURORA CO 80010	5 Medicare wages and tips: 1452.00 — 6 Medicare tax withheld: 21.05
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1452.00	46.00	1452.00	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000062-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 513-78-1439		1 Wages, tips, other compensation: 1452.00 / 2 Federal Income tax withheld: 97.71
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 1452.00 / 4 Social Security tax withheld: 90.02
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips: 1452.00 / 6 Medicare tax withheld: 21.05
		YALANDA BROOKS 363 GENEVA STREET #A AURORA CO 80010	7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1452.00	46.00	1452.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you reported to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000060-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3422.50 — 2 Federal Income tax withheld: 215.61
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3422.50 — 4 Social Security tax withheld: 212.20
e Employee's name, address, and ZIP code: ELAINE BURTON, 4403 FLANDERS ST, DENVER CO 80249	5 Medicare wages and tips: 3422.50 — 6 Medicare tax withheld: 49.63
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3422.50	97.00	3422.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000060-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3422.50 — 2 Federal Income tax withheld: 215.61
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3422.50 — 4 Social Security tax withheld: 212.20
e Employee's name, address, and ZIP code: ELAINE BURTON, 4403 FLANDERS ST, DENVER CO 80249	5 Medicare wages and tips: 3422.50 — 6 Medicare tax withheld: 49.63
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3422.50	97.00	3422.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000060-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 3422.50 — 2 Federal Income tax withheld: 215.61
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 3422.50 — 4 Social Security tax withheld: 212.20
e Employee's name, address, and ZIP code: ELAINE BURTON, 4403 FLANDERS ST, DENVER CO 80249	5 Medicare wages and tips: 3422.50 — 6 Medicare tax withheld: 49.63
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3422.50	97.00	3422.50	14.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number 0095-13058390 0000000060-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number				1 Wages, tips, other compensation 3422.50	2 Federal Income tax withheld 215.61		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages 3422.50	4 Social Security tax withheld 212.20		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ELAINE BURTON 4403 FLANDERS ST DENVER CO 80249			5 Medicare wages and tips 3422.50	6 Medicare tax withheld 49.63		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State / Employer's state I.D. No.		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO	30941838	3422.50	97.00	3422.50	14.00	CO AUROR		

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000041-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-11-6922
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ANNETTE CARLISLE, 4055 ALBION ST, DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2774.20	
3 Social Security wages	4 Social Security tax withheld
2774.20	172.00
5 Medicare wages and tips	6 Medicare tax withheld
2774.20	40.23
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2774.20	3.00	2774.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000041-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-11-6922
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ANNETTE CARLISLE, 4055 ALBION ST, DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2774.20	
3 Social Security wages	4 Social Security tax withheld
2774.20	172.00
5 Medicare wages and tips	6 Medicare tax withheld
2774.20	40.23
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2774.20	3.00	2774.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000041-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-11-6922
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ANNETTE CARLISLE, 4055 ALBION ST, DENVER CO 80216	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2774.20	
3 Social Security wages	4 Social Security tax withheld
2774.20	172.00
5 Medicare wages and tips	6 Medicare tax withheld
2774.20	40.23
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2774.20	3.00	2774.20	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000041-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 521-11-6922		1 Wages, tips, other compensation: 2774.20 / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 2774.20 / 4 Social Security tax withheld: 172.00
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: ANNETTE CARLISLE 4055 ALBION ST DENVER CO 80216	5 Medicare wages and tips: 2774.20 / 6 Medicare tax withheld: 40.23 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2774.20	3.00	2774.20	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000024-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393	1 Wages, tips, other compensation: 5184.00	2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 5184.00	4 Social Security tax withheld: 321.41
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: CALVIN COLEY, 1769 HANOVER ST, AURORA CO 80010	5 Medicare wages and tips: 5184.00	6 Medicare tax withheld: 75.17
		7 Social Security tips:	8 Allocated Tips:
		10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5184.00		5184.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000024-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393	1 Wages, tips, other compensation: 5184.00	2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 5184.00	4 Social Security tax withheld: 321.41
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: CALVIN COLEY, 1769 HANOVER ST, AURORA CO 80010	5 Medicare wages and tips: 5184.00	6 Medicare tax withheld: 75.17
		7 Social Security tips:	8 Allocated Tips:
		10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5184.00		5184.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000024-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393	1 Wages, tips, other compensation: 5184.00	2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 5184.00	4 Social Security tax withheld: 321.41
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: CALVIN COLEY, 1769 HANOVER ST, AURORA CO 80010	5 Medicare wages and tips: 5184.00	6 Medicare tax withheld: 75.17
		7 Social Security tips:	8 Allocated Tips:
		10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5184.00		5184.00	22.00	CO AUROR

Notice to Employee

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Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000024-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393		1 Wages, tips, other compensation: 5184.00 / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 5184.00 / 4 Social Security tax withheld: 321.41
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	5 Medicare wages and tips: 5184.00 / 6 Medicare tax withheld: 75.17 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5184.00		5184.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you failed to report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000004-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-08-1995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 7584.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 7584.00 — 4 Social Security tax withheld: 470.21
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239	5 Medicare wages and tips: 7584.00 — 6 Medicare tax withheld: 109.97
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	7584.00	168.00	7584.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000004-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-08-1995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 7584.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 7584.00 — 4 Social Security tax withheld: 470.21
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239	5 Medicare wages and tips: 7584.00 — 6 Medicare tax withheld: 109.97
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	7584.00	168.00	7584.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000004-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-08-1995	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 7584.00 — 2 Federal Income tax withheld:
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 7584.00 — 4 Social Security tax withheld: 470.21
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239	5 Medicare wages and tips: 7584.00 — 6 Medicare tax withheld: 109.97
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	7584.00	168.00	7584.00	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000004-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-08-1995		1 Wages, tips, other compensation: 7584.00 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 7584.00 / 4 Social Security tax withheld: 470.21
12 See Instrs. for Box 12: / 14 Other:	e Employee's name, address, and ZIP code: SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239		5 Medicare wages and tips: 7584.00 / 6 Medicare tax withheld: 109.97 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	7584.00	168.00	7584.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:	e Employee's name, address, and ZIP code:		5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:	e Employee's name, address, and ZIP code:		5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000057-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 352-64-3902
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: AYANNA COOK, 1100 DALLAS ST, AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
442.00	12.54
3 Social Security wages	**4 Social Security tax withheld**
442.00	27.40
5 Medicare wages and tips	**6 Medicare tax withheld**
442.00	6.41
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	442.00	6.00	442.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000057-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 352-64-3902
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: AYANNA COOK, 1100 DALLAS ST, AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
442.00	12.54
3 Social Security wages	**4 Social Security tax withheld**
442.00	27.40
5 Medicare wages and tips	**6 Medicare tax withheld**
442.00	6.41
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	442.00	6.00	442.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000057-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 352-64-3902
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: AYANNA COOK, 1100 DALLAS ST, AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
442.00	12.54
3 Social Security wages	**4 Social Security tax withheld**
442.00	27.40
5 Medicare wages and tips	**6 Medicare tax withheld**
442.00	6.41
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	442.00	6.00	442.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000057-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 352-64-3902		1 Wages, tips, other compensation: 442.00	2 Federal Income tax withheld: 12.54	
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 442.00	4 Social Security tax withheld: 27.40	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: AYANNA COOK 1100 DALLAS ST AURORA CO 80011	5 Medicare wages and tips: 442.00	6 Medicare tax withheld: 6.41	
			7 Social Security tips	8 Allocated Tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	442.00	6.00	442.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld	
			7 Social Security tips	8 Allocated Tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld	
			7 Social Security tips	8 Allocated Tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000045-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 425-45-2124
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: APRIL D DRIVER, 2257 W BYERS DR, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
207.00	4.87
3 Social Security wages	**4 Social Security tax withheld**
207.00	12.83
5 Medicare wages and tips	**6 Medicare tax withheld**
207.00	3.00
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	207.00	5.00	207.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000045-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 425-45-2124
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: APRIL D DRIVER, 2257 W BYERS DR, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
207.00	4.87
3 Social Security wages	**4 Social Security tax withheld**
207.00	12.83
5 Medicare wages and tips	**6 Medicare tax withheld**
207.00	3.00
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	207.00	5.00	207.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000045-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 425-45-2124
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: APRIL D DRIVER, 2257 W BYERS DR, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
207.00	4.87
3 Social Security wages	**4 Social Security tax withheld**
207.00	12.83
5 Medicare wages and tips	**6 Medicare tax withheld**
207.00	3.00
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	207.00	5.00	207.00	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000045-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 425-45-2124		1 Wages, tips, other compensation: 207.00 / 2 Federal Income tax withheld: 4.87
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 207.00 / 4 Social Security tax withheld: 12.83
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: APRIL D DRIVER 2257 W BYERS DR DENVER CO 80223	5 Medicare wages and tips: 207.00 / 6 Medicare tax withheld: 3.00 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	207.00	5.00	207.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000061-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-18-9173
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ELIJAH J DURANT, 3311 CHASE ST, WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3996.00	257.13
3 Social Security wages	**4 Social Security tax withheld**
3996.00	247.75
5 Medicare wages and tips	**6 Medicare tax withheld**
3996.00	57.94
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3996.00	117.00	3996.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000061-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-18-9173
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ELIJAH J DURANT, 3311 CHASE ST, WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3996.00	257.13
3 Social Security wages	**4 Social Security tax withheld**
3996.00	247.75
5 Medicare wages and tips	**6 Medicare tax withheld**
3996.00	57.94
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3996.00	117.00	3996.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000061-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-18-9173
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ELIJAH J DURANT, 3311 CHASE ST, WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3996.00	257.13
3 Social Security wages	**4 Social Security tax withheld**
3996.00	247.75
5 Medicare wages and tips	**6 Medicare tax withheld**
3996.00	57.94
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3996.00	117.00	3996.00	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the difference shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000061-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 3996.00	2 Federal Income tax withheld 257.13
b Employer's identification number 80-0438877	a Employee's social security number 652-18-9173		3 Social Security wages 3996.00	4 Social Security tax withheld 247.75
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 3996.00	6 Medicare tax withheld 57.94
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ELIJAH J DURANT 3311 CHASE ST WHEAT RIDGE CO 80212	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3996.00	117.00	3996.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000006-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: MIRNA FLORES

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
8226.00	58.74
3 Social Security wages	**4 Social Security tax withheld**
8226.00	510.01
5 Medicare wages and tips	**6 Medicare tax withheld**
8226.00	119.28
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8226.00	27.00	8226.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000006-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: MIRNA FLORES

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
8226.00	58.74
3 Social Security wages	**4 Social Security tax withheld**
8226.00	510.01
5 Medicare wages and tips	**6 Medicare tax withheld**
8226.00	119.28
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8226.00	27.00	8226.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000006-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: MIRNA FLORES

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
8226.00	58.74
3 Social Security wages	**4 Social Security tax withheld**
8226.00	510.01
5 Medicare wages and tips	**6 Medicare tax withheld**
8226.00	119.28
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8226.00	27.00	8226.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000006-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	
		MIRNA FLORES	

1 Wages, tips, other compensation	2 Federal Income tax withheld
8226.00	58.74
3 Social Security wages	**4 Social Security tax withheld**
8226.00	510.01
5 Medicare wages and tips	**6 Medicare tax withheld**
8226.00	119.28
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8226.00	27.00	8226.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

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Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000036-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 562-33-6426	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 268.80 — 2 Federal Income tax withheld: 11.05
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 268.80 — 4 Social Security tax withheld: 16.67
e Employee's name, address, and ZIP code: JOHN GIVENS, 1155 S HAVANA ST # 396, AURORA CO 80012	5 Medicare wages and tips: 268.80 — 6 Medicare tax withheld: 3.90
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	268.80	8.00	268.80	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000036-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 562-33-6426	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 268.80 — 2 Federal Income tax withheld: 11.05
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 268.80 — 4 Social Security tax withheld: 16.67
e Employee's name, address, and ZIP code: JOHN GIVENS, 1155 S HAVANA ST # 396, AURORA CO 80012	5 Medicare wages and tips: 268.80 — 6 Medicare tax withheld: 3.90
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	268.80	8.00	268.80	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000036-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 562-33-6426	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 268.80 — 2 Federal Income tax withheld: 11.05
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 268.80 — 4 Social Security tax withheld: 16.67
e Employee's name, address, and ZIP code: JOHN GIVENS, 1155 S HAVANA ST # 396, AURORA CO 80012	5 Medicare wages and tips: 268.80 — 6 Medicare tax withheld: 3.90
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	268.80	8.00	268.80	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000036-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 562-33-6426		1 Wages, tips, other compensation: 268.80 / 2 Federal Income tax withheld: 11.05
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 268.80 / 4 Social Security tax withheld: 16.67
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: JOHN GIVENS 1155 S HAVANA ST # 396 AURORA CO 80012	5 Medicare wages and tips: 268.80 / 6 Medicare tax withheld: 3.90 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	268.80	8.00	268.80	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000019-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-13-8337	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4806.30 — 2 Federal Income tax withheld: 290.67
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4806.30 — 4 Social Security tax withheld: 297.99
e Employee's name, address, and ZIP code: DEWANDA GRAHAM, 4617 FREEPORT WAY, DENVER CO 80239	5 Medicare wages and tips: 4806.30 — 6 Medicare tax withheld: 69.69
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4806.30	140.00	4806.30	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000019-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-13-8337	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4806.30 — 2 Federal Income tax withheld: 290.67
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4806.30 — 4 Social Security tax withheld: 297.99
e Employee's name, address, and ZIP code: DEWANDA GRAHAM, 4617 FREEPORT WAY, DENVER CO 80239	5 Medicare wages and tips: 4806.30 — 6 Medicare tax withheld: 69.69
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4806.30	140.00	4806.30	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000019-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-13-8337	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 4806.30 — 2 Federal Income tax withheld: 290.67
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 4806.30 — 4 Social Security tax withheld: 297.99
e Employee's name, address, and ZIP code: DEWANDA GRAHAM, 4617 FREEPORT WAY, DENVER CO 80239	5 Medicare wages and tips: 4806.30 — 6 Medicare tax withheld: 69.69
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4806.30	140.00	4806.30	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000019-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-13-8337		1 Wages, tips, other compensation: 4806.30
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld: 290.67
			3 Social Security wages: 4806.30
			4 Social Security tax withheld: 297.99
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips: 4806.30
			6 Medicare tax withheld: 69.69
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4806.30	140.00	4806.30	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	2 Federal Income tax withheld:
			3 Social Security wages:
			4 Social Security tax withheld:
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:
			6 Medicare tax withheld:
			7 Social Security tips:
			8 Allocated Tips:
			10 Dependent care benefits:
			11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tax you did not collect from your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000055-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: WILLIAM HAYES, 363 GENEVA ST APT A, AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
4560.00	297.70
3 Social Security wages	4 Social Security tax withheld
4560.00	282.72
5 Medicare wages and tips	6 Medicare tax withheld
4560.00	66.12
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4560.00	140.00	4560.00	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000055-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: WILLIAM HAYES, 363 GENEVA ST APT A, AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
4560.00	297.70
3 Social Security wages	4 Social Security tax withheld
4560.00	282.72
5 Medicare wages and tips	6 Medicare tax withheld
4560.00	66.12
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4560.00	140.00	4560.00	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000055-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: WILLIAM HAYES, 363 GENEVA ST APT A, AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
4560.00	297.70
3 Social Security wages	4 Social Security tax withheld
4560.00	282.72
5 Medicare wages and tips	6 Medicare tax withheld
4560.00	66.12
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4560.00	140.00	4560.00	12.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000055-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891		1 Wages, tips, other compensation: 4560.00 / 2 Federal Income tax withheld: 297.70
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 4560.00 / 4 Social Security tax withheld: 282.72
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	5 Medicare wages and tips: 4560.00 / 6 Medicare tax withheld: 66.12 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4560.00	140.00	4560.00	12.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tax. You do not owe this tax to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000056-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-12-0504
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
10500.00	728.67
3 Social Security wages	**4 Social Security tax withheld**
10500.00	651.00
5 Medicare wages and tips	**6 Medicare tax withheld**
10500.00	152.25
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	10500.00	337.00	10500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000056-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-12-0504
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
10500.00	728.67
3 Social Security wages	**4 Social Security tax withheld**
10500.00	651.00
5 Medicare wages and tips	**6 Medicare tax withheld**
10500.00	152.25
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	10500.00	337.00	10500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000056-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-12-0504
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
10500.00	728.67
3 Social Security wages	**4 Social Security tax withheld**
10500.00	651.00
5 Medicare wages and tips	**6 Medicare tax withheld**
10500.00	152.25
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	10500.00	337.00	10500.00	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other wages you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number 0095-13058390 0000000056-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 652-12-0504			1 Wages, tips, other compensation 10500.00	2 Federal Income tax withheld 728.67		
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages 10500.00	4 Social Security tax withheld 651.00		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010		5 Medicare wages and tips 10500.00	6 Medicare tax withheld 152.25		
				7 Social Security tips	8 Allocated Tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO	30941838	10500.00	337.00	10500.00	22.00	CO AUROR	

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number			1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
				7 Social Security tips	8 Allocated Tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number			1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay				3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
				7 Social Security tips	8 Allocated Tips		
				10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000064-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: JAIZIONNE JACKSON, 1190 S SHERIDON BLVD APT 11, DENVER CO 80232

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2808.00	185.82
3 Social Security wages	**4 Social Security tax withheld**
2808.00	174.10
5 Medicare wages and tips	**6 Medicare tax withheld**
2808.00	40.72
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2808.00	87.00	2808.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000064-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: JAIZIONNE JACKSON, 1190 S SHERIDON BLVD APT 11, DENVER CO 80232

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2808.00	185.82
3 Social Security wages	**4 Social Security tax withheld**
2808.00	174.10
5 Medicare wages and tips	**6 Medicare tax withheld**
2808.00	40.72
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2808.00	87.00	2808.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000064-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: JAIZIONNE JACKSON, 1190 S SHERIDON BLVD APT 11, DENVER CO 80232

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2808.00	185.82
3 Social Security wages	**4 Social Security tax withheld**
2808.00	174.10
5 Medicare wages and tips	**6 Medicare tax withheld**
2808.00	40.72
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2808.00	87.00	2808.00	6.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000064-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 2808.00	2 Federal Income tax withheld 185.82
b Employer's identification number 80-0438877	a Employee's social security number 514-15-1774		3 Social Security wages 2808.00	4 Social Security tax withheld 174.10
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 2808.00	6 Medicare tax withheld 40.72
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2808.00	87.00	2808.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tax you did not collect from your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000007-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEJANE LATTANY, 14475 ROBINS DR, DENVER CO 80239	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 9680.00	2 Federal Income tax withheld: 702.89
3 Social Security wages: 9680.00	4 Social Security tax withheld: 600.16
5 Medicare wages and tips: 9680.00	6 Medicare tax withheld: 140.36
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9680.00	280.00	9680.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000007-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEJANE LATTANY, 14475 ROBINS DR, DENVER CO 80239	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 9680.00	2 Federal Income tax withheld: 702.89
3 Social Security wages: 9680.00	4 Social Security tax withheld: 600.16
5 Medicare wages and tips: 9680.00	6 Medicare tax withheld: 140.36
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9680.00	280.00	9680.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000007-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-77-9492
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEJANE LATTANY, 14475 ROBINS DR, DENVER CO 80239	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 9680.00	2 Federal Income tax withheld: 702.89
3 Social Security wages: 9680.00	4 Social Security tax withheld: 600.16
5 Medicare wages and tips: 9680.00	6 Medicare tax withheld: 140.36
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9680.00	280.00	9680.00	8.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number 0095-13058390 0000000007-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 80-0438877	a Employee's social security number 523-77-9492					1 Wages, tips, other compensation 9680.00	2 Federal Income tax withheld 702.89	
13 Statutory Employee / Retirement plan / Third-party sick pay						3 Social Security wages 9680.00	4 Social Security tax withheld 600.16	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239				5 Medicare wages and tips 9680.00	6 Medicare tax withheld 140.36	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
15 State CO	Employer's state I.D. No. 30941838	16 State wages, tips, etc. 9680.00	17 State income tax 280.00	18 Local wages, tips, etc. 9680.00	19 Local income tax 8.00	20 Locality name CO AUROR		

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number					1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay						3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code				5 Medicare wages and tips	6 Medicare tax withheld	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number					1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay						3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code				5 Medicare wages and tips	6 Medicare tax withheld	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000014-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: TENEA T LATTANY, 4645 E 5TH AVE, DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
12376.00	624.01
3 Social Security wages	**4 Social Security tax withheld**
12376.00	767.31
5 Medicare wages and tips	**6 Medicare tax withheld**
12376.00	179.45
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12376.00	281.00	12376.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000014-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: TENEA T LATTANY, 4645 E 5TH AVE, DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
12376.00	624.01
3 Social Security wages	**4 Social Security tax withheld**
12376.00	767.31
5 Medicare wages and tips	**6 Medicare tax withheld**
12376.00	179.45
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12376.00	281.00	12376.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000014-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: TENEA T LATTANY, 4645 E 5TH AVE, DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
12376.00	624.01
3 Social Security wages	**4 Social Security tax withheld**
12376.00	767.31
5 Medicare wages and tips	**6 Medicare tax withheld**
12376.00	179.45
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12376.00	281.00	12376.00	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000014-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873		1 Wages, tips, other compensation: 12376.00 / 2 Federal Income tax withheld: 624.01
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 12376.00 / 4 Social Security tax withheld: 767.31
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	5 Medicare wages and tips: 12376.00 / 6 Medicare tax withheld: 179.45 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12376.00	281.00	12376.00	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000027-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-27-0712	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 924.00 — 2 Federal Income tax withheld: 62.80
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 924.00 — 4 Social Security tax withheld: 57.29
e Employee's name, address, and ZIP code: MICHAEL LEE, 146 S EAGLE CIRCLE, AURORA CO 80012	5 Medicare wages and tips: 924.00 — 6 Medicare tax withheld: 13.40
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	924.00	31.00	924.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000027-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-27-0712	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 924.00 — 2 Federal Income tax withheld: 62.80
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 924.00 — 4 Social Security tax withheld: 57.29
e Employee's name, address, and ZIP code: MICHAEL LEE, 146 S EAGLE CIRCLE, AURORA CO 80012	5 Medicare wages and tips: 924.00 — 6 Medicare tax withheld: 13.40
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	924.00	31.00	924.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000027-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-27-0712	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 924.00 — 2 Federal Income tax withheld: 62.80
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 924.00 — 4 Social Security tax withheld: 57.29
e Employee's name, address, and ZIP code: MICHAEL LEE, 146 S EAGLE CIRCLE, AURORA CO 80012	5 Medicare wages and tips: 924.00 — 6 Medicare tax withheld: 13.40
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	924.00	31.00	924.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare taxes owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000027-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 924.00	2 Federal Income tax withheld 62.80
b Employer's identification number 80-0438877	a Employee's social security number 524-27-0712		3 Social Security wages 924.00	4 Social Security tax withheld 57.29
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 924.00	6 Medicare tax withheld 13.40
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code MICHAEL LEE 146 S EAGLE CIRCLE AURORA CO 80012	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	924.00	31.00	924.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare taxes owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000021-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5304.00	340.44
3 Social Security wages	4 Social Security tax withheld
5304.00	328.85
5 Medicare wages and tips	6 Medicare tax withheld
5304.00	76.91
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5304.00	158.00	5304.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000021-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5304.00	340.44
3 Social Security wages	4 Social Security tax withheld
5304.00	328.85
5 Medicare wages and tips	6 Medicare tax withheld
5304.00	76.91
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5304.00	158.00	5304.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000021-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5304.00	340.44
3 Social Security wages	4 Social Security tax withheld
5304.00	328.85
5 Medicare wages and tips	6 Medicare tax withheld
5304.00	76.91
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5304.00	158.00	5304.00	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare taxes owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000021-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226		1 Wages, tips, other compensation: 5304.00 / 2 Federal Income tax withheld: 340.44
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 5304.00 / 4 Social Security tax withheld: 328.85
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	5 Medicare wages and tips: 5304.00 / 6 Medicare tax withheld: 76.91 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5304.00	158.00	5304.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare taxes owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000046-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-14-0029	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 5760.00 — 2 Federal Income tax withheld: 196.08
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 5760.00 — 4 Social Security tax withheld: 357.12
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	5 Medicare wages and tips: 5760.00 — 6 Medicare tax withheld: 83.52
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5760.00	102.00	5760.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000046-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-14-0029	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 5760.00 — 2 Federal Income tax withheld: 196.08
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 5760.00 — 4 Social Security tax withheld: 357.12
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	5 Medicare wages and tips: 5760.00 — 6 Medicare tax withheld: 83.52
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5760.00	102.00	5760.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000046-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 653-14-0029	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 5760.00 — 2 Federal Income tax withheld: 196.08
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 5760.00 — 4 Social Security tax withheld: 357.12
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	5 Medicare wages and tips: 5760.00 — 6 Medicare tax withheld: 83.52
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5760.00	102.00	5760.00	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare taxes owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number 0095-13058390 0000000046-0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0029				1 Wages, tips, other compensation 5760.00	2 Federal Income tax withheld 196.08		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages 5760.00	4 Social Security tax withheld 357.12		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227			5 Medicare wages and tips 5760.00	6 Medicare tax withheld 83.52		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
CO	30941838	5760.00	102.00	5760.00	22.00	CO AUROR		

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2019

d Control number	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000040-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 422-96-3729
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: BETTY MOORE, 4463 STEEL STREET, DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
8116.00	510.87
3 Social Security wages	4 Social Security tax withheld
8116.00	503.19
5 Medicare wages and tips	6 Medicare tax withheld
8116.00	117.68
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8116.00	239.00	8116.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000040-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 422-96-3729
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: BETTY MOORE, 4463 STEEL STREET, DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
8116.00	510.87
3 Social Security wages	4 Social Security tax withheld
8116.00	503.19
5 Medicare wages and tips	6 Medicare tax withheld
8116.00	117.68
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8116.00	239.00	8116.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000040-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 422-96-3729
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: BETTY MOORE, 4463 STEEL STREET, DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
8116.00	510.87
3 Social Security wages	4 Social Security tax withheld
8116.00	503.19
5 Medicare wages and tips	6 Medicare tax withheld
8116.00	117.68
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8116.00	239.00	8116.00	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000040-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 422-96-3729		1 Wages, tips, other compensation: 8116.00	2 Federal Income tax withheld: 510.87	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 8116.00	4 Social Security tax withheld: 503.19	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: BETTY MOORE 4463 STEEL STREET DENVER CO 80230	5 Medicare wages and tips: 8116.00	6 Medicare tax withheld: 117.68	
			7 Social Security tips:	8 Allocated Tips:	
			10 Dependent care benefits:	11 Nonqualified plans:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8116.00	239.00	8116.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages:	4 Social Security tax withheld:	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:	6 Medicare tax withheld:	
			7 Social Security tips:	8 Allocated Tips:	
			10 Dependent care benefits:	11 Nonqualified plans:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation:	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages:	4 Social Security tax withheld:	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code:	5 Medicare wages and tips:	6 Medicare tax withheld:	
			7 Social Security tips:	8 Allocated Tips:	
			10 Dependent care benefits:	11 Nonqualified plans:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000011-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-83-7462
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: DEVIN MOORE

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
477.30	
3 Social Security wages	4 Social Security tax withheld
477.30	29.59
5 Medicare wages and tips	6 Medicare tax withheld
477.30	6.92
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	477.30	13.00	477.30	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000011-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-83-7462
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: DEVIN MOORE

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
477.30	
3 Social Security wages	4 Social Security tax withheld
477.30	29.59
5 Medicare wages and tips	6 Medicare tax withheld
477.30	6.92
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	477.30	13.00	477.30	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000011-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 521-83-7462
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: DEVIN MOORE

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
477.30	
3 Social Security wages	4 Social Security tax withheld
477.30	29.59
5 Medicare wages and tips	6 Medicare tax withheld
477.30	6.92
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	477.30	13.00	477.30	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000011-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 521-83-7462		1 Wages, tips, other compensation: 477.30 / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 477.30 / 4 Social Security tax withheld: 29.59
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: DEVIN MOORE	5 Medicare wages and tips: 477.30 / 6 Medicare tax withheld: 6.92
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	477.30	13.00	477.30	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000059-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-65-8755	1 Wages, tips, other compensation: 324.00	2 Federal Income tax withheld: 0.97
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 324.00	4 Social Security tax withheld: 20.09
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: SADAYA MOORE, 14201 E 1ST DR APT 306, AURORA CO 80011	5 Medicare wages and tips: 324.00	6 Medicare tax withheld: 4.70
		7 Social Security tips	8 Allocated Tips
		10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	324.00		324.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000059-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-65-8755	1 Wages, tips, other compensation: 324.00	2 Federal Income tax withheld: 0.97
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 324.00	4 Social Security tax withheld: 20.09
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: SADAYA MOORE, 14201 E 1ST DR APT 306, AURORA CO 80011	5 Medicare wages and tips: 324.00	6 Medicare tax withheld: 4.70
		7 Social Security tips	8 Allocated Tips
		10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	324.00		324.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000059-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-65-8755	1 Wages, tips, other compensation: 324.00	2 Federal Income tax withheld: 0.97
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 324.00	4 Social Security tax withheld: 20.09
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: SADAYA MOORE, 14201 E 1ST DR APT 306, AURORA CO 80011	5 Medicare wages and tips: 324.00	6 Medicare tax withheld: 4.70
		7 Social Security tips	8 Allocated Tips
		10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	324.00		324.00	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000059-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-65-8755		1 Wages, tips, other compensation: 324.00 / 2 Federal Income tax withheld: 0.97
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 324.00 / 4 Social Security tax withheld: 20.09
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips: 324.00 / 6 Medicare tax withheld: 4.70
		SADAYA MOORE 14201 E 1ST DR APT 306 AURORA CO 80011	7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	324.00		324.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000042-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
13286.00	984.97
3 Social Security wages	4 Social Security tax withheld
13286.00	823.73
5 Medicare wages and tips	6 Medicare tax withheld
13286.00	192.65
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13286.00	439.00	13286.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000042-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
13286.00	984.97
3 Social Security wages	4 Social Security tax withheld
13286.00	823.73
5 Medicare wages and tips	6 Medicare tax withheld
13286.00	192.65
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13286.00	439.00	13286.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000042-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
13286.00	984.97
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13286.00	192.65
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10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13286.00	439.00	13286.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the difference between the amount shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000042-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 13286.00	2 Federal Income tax withheld 984.97
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275		3 Social Security wages 13286.00	4 Social Security tax withheld 823.73
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 13286.00	6 Medicare tax withheld 192.65
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code WENDY MORALES	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13286.00	439.00	13286.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000052-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-47-0739	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 5774.00 — 2 Federal Income tax withheld: 350.44
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 5774.00 — 4 Social Security tax withheld: 357.99
e Employee's name, address, and ZIP code: ADAM R ROMERO, 35 S LOGAN ST APT 402, DENVER CO 80219	5 Medicare wages and tips: 5774.00 — 6 Medicare tax withheld: 83.72
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5774.00	166.00	5774.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

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b Employer's identification number: 80-0438877 — a Employee's social security number: 522-47-0739	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 5774.00 — 2 Federal Income tax withheld: 350.44
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	7 Social Security tips — 8 Allocated Tips
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15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5774.00	166.00	5774.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000052-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 522-47-0739	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
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	7 Social Security tips — 8 Allocated Tips
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15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5774.00	166.00	5774.00	22.00	CO AUROR

Notice to Employee

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Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000052-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 5774.00	2 Federal Income tax withheld 350.44
b Employer's identification number 80-0438877	a Employee's social security number 522-47-0739		3 Social Security wages 5774.00	4 Social Security tax withheld 357.99
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 5774.00	6 Medicare tax withheld 83.72
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5774.00	166.00	5774.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you reported to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000063-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-55-8220	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2072.00 — 2 Federal Income tax withheld: 128.05
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 2072.00 — 4 Social Security tax withheld: 128.46
e Employee's name, address, and ZIP code: ROSHAD SMITH, 4463 STEELE ST, DENVER CO 80216	5 Medicare wages and tips: 2072.00 — 6 Medicare tax withheld: 30.04
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2072.00	60.00	2072.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000063-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-55-8220	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2072.00 — 2 Federal Income tax withheld: 128.05
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 2072.00 — 4 Social Security tax withheld: 128.46
e Employee's name, address, and ZIP code: ROSHAD SMITH, 4463 STEELE ST, DENVER CO 80216	5 Medicare wages and tips: 2072.00 — 6 Medicare tax withheld: 30.04
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2072.00	60.00	2072.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000063-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-55-8220	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 2072.00 — 2 Federal Income tax withheld: 128.05
12 See Instrs. for Box 12 / 14 Other	3 Social Security wages: 2072.00 — 4 Social Security tax withheld: 128.46
e Employee's name, address, and ZIP code: ROSHAD SMITH, 4463 STEELE ST, DENVER CO 80216	5 Medicare wages and tips: 2072.00 — 6 Medicare tax withheld: 30.04
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2072.00	60.00	2072.00	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000063-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-55-8220		1 Wages, tips, other compensation: 2072.00 / 2 Federal Income tax withheld: 128.05
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 2072.00 / 4 Social Security tax withheld: 128.46
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips: 2072.00 / 6 Medicare tax withheld: 30.04
		ROSHAD SMITH 4463 STEELE ST DENVER CO 80216	7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2072.00	60.00	2072.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000034-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN, 11815 EAST CANAL DR, AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
224.00	6.57
3 Social Security wages	4 Social Security tax withheld
224.00	13.89
5 Medicare wages and tips	6 Medicare tax withheld
224.00	3.25
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	224.00	3.00	224.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000034-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN, 11815 EAST CANAL DR, AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
224.00	6.57
3 Social Security wages	4 Social Security tax withheld
224.00	13.89
5 Medicare wages and tips	6 Medicare tax withheld
224.00	3.25
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	224.00	3.00	224.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000034-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN, 11815 EAST CANAL DR, AURORA CO 80011	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
224.00	6.57
3 Social Security wages	4 Social Security tax withheld
224.00	13.89
5 Medicare wages and tips	6 Medicare tax withheld
224.00	3.25
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	224.00	3.00	224.00	0.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000034-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-8141		1 Wages, tips, other compensation: 224.00	2 Federal Income tax withheld: 6.57	
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 224.00	4 Social Security tax withheld: 13.89	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: NYOMI ISIS TURPIN 11815 EAST CANAL DR AURORA CO 80011	5 Medicare wages and tips: 224.00	6 Medicare tax withheld: 3.25	
			7 Social Security tips	8 Allocated Tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	224.00	3.00	224.00	0.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld	
			7 Social Security tips	8 Allocated Tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld	
			7 Social Security tips	8 Allocated Tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000022-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: JASMINE VALDEZ, 2342 MOLINE STREET, AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3126.50	
3 Social Security wages	**4 Social Security tax withheld**
3126.50	193.84
5 Medicare wages and tips	**6 Medicare tax withheld**
3126.50	45.33
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3126.50		3126.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000022-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: JASMINE VALDEZ, 2342 MOLINE STREET, AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3126.50	
3 Social Security wages	**4 Social Security tax withheld**
3126.50	193.84
5 Medicare wages and tips	**6 Medicare tax withheld**
3126.50	45.33
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3126.50		3126.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000022-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: JASMINE VALDEZ, 2342 MOLINE STREET, AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
3126.50	
3 Social Security wages	**4 Social Security tax withheld**
3126.50	193.84
5 Medicare wages and tips	**6 Medicare tax withheld**
3126.50	45.33
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3126.50		3126.50	14.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000022-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047		1 Wages, tips, other compensation: 3126.50 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 3126.50 / 4 Social Security tax withheld: 193.84
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips: 3126.50 / 6 Medicare tax withheld: 45.33 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3126.50		3126.50	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld: 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000038-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-61-7950	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 11592.00 — 2 Federal Income tax withheld: 779.28
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 11592.00 — 4 Social Security tax withheld: 718.70
e Employee's name, address, and ZIP code: DEREK WASHINGTON, 23771 E ALABAMA DR, AURORA CO 80018	5 Medicare wages and tips: 11592.00 — 6 Medicare tax withheld: 168.08
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	11592.00	366.00	11592.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000038-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-61-7950	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 11592.00 — 2 Federal Income tax withheld: 779.28
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 11592.00 — 4 Social Security tax withheld: 718.70
e Employee's name, address, and ZIP code: DEREK WASHINGTON, 23771 E ALABAMA DR, AURORA CO 80018	5 Medicare wages and tips: 11592.00 — 6 Medicare tax withheld: 168.08
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	11592.00	366.00	11592.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000038-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 523-61-7950	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 11592.00 — 2 Federal Income tax withheld: 779.28
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 11592.00 — 4 Social Security tax withheld: 718.70
e Employee's name, address, and ZIP code: DEREK WASHINGTON, 23771 E ALABAMA DR, AURORA CO 80018	5 Medicare wages and tips: 11592.00 — 6 Medicare tax withheld: 168.08
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	11592.00	366.00	11592.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0095-13058390 0000000038-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-61-7950		1 Wages, tips, other compensation: 11592.00 / 2 Federal Income tax withheld: 779.28
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 11592.00 / 4 Social Security tax withheld: 718.70
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips: 11592.00 / 6 Medicare tax withheld: 168.08
		DEREK WASHINGTON 23771 E ALABAMA DR AURORA CO 80018	7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	11592.00	366.00	11592.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000051-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-06-0245	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1656.00 — 2 Federal Income tax withheld: 38.96
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1656.00 — 4 Social Security tax withheld: 102.67
e Employee's name, address, and ZIP code: DAMON WHITE, 15070 E 55TH AVE, DENVER CO 80239	5 Medicare wages and tips: 1656.00 — 6 Medicare tax withheld: 24.01
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1656.00	22.00	1656.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000051-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-06-0245	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1656.00 — 2 Federal Income tax withheld: 38.96
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1656.00 — 4 Social Security tax withheld: 102.67
e Employee's name, address, and ZIP code: DAMON WHITE, 15070 E 55TH AVE, DENVER CO 80239	5 Medicare wages and tips: 1656.00 — 6 Medicare tax withheld: 24.01
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1656.00	22.00	1656.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000051-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number: 524-06-0245	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee / Retirement plan / Third-party sick pay	1 Wages, tips, other compensation: 1656.00 — 2 Federal Income tax withheld: 38.96
12 See Instrs. for Box 12 — 14 Other	3 Social Security wages: 1656.00 — 4 Social Security tax withheld: 102.67
e Employee's name, address, and ZIP code: DAMON WHITE, 15070 E 55TH AVE, DENVER CO 80239	5 Medicare wages and tips: 1656.00 — 6 Medicare tax withheld: 24.01
	7 Social Security tips — 8 Allocated Tips
	10 Dependent care benefits — 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1656.00	22.00	1656.00	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000051-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 1656.00	2 Federal Income tax withheld 38.96
b Employer's identification number 80-0438877	a Employee's social security number 524-06-0245		3 Social Security wages 1656.00	4 Social Security tax withheld 102.67
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 1656.00	6 Medicare tax withheld 24.01
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DAMON WHITE 15070 E 55TH AVE DENVER CO 80239	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1656.00	22.00	1656.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you reported to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000058-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 420.00 — 2 Federal Income tax withheld: 26.17
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 420.00 — 4 Social Security tax withheld: 26.04
e Employee's name, address, and ZIP code: JOYCE WILLIAMS	5 Medicare wages and tips: 420.00 — 6 Medicare tax withheld: 6.09
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	420.00	12.00	420.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000058-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 420.00 — 2 Federal Income tax withheld: 26.17
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 420.00 — 4 Social Security tax withheld: 26.04
e Employee's name, address, and ZIP code: JOYCE WILLIAMS	5 Medicare wages and tips: 420.00 — 6 Medicare tax withheld: 6.09
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	420.00	12.00	420.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000058-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877 — a Employee's social security number:	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008
13 Statutory Employee: — Retirement plan: — Third-party sick pay:	1 Wages, tips, other compensation: 420.00 — 2 Federal Income tax withheld: 26.17
12 See Instrs. for Box 12: — 14 Other:	3 Social Security wages: 420.00 — 4 Social Security tax withheld: 26.04
e Employee's name, address, and ZIP code: JOYCE WILLIAMS	5 Medicare wages and tips: 420.00 — 6 Medicare tax withheld: 6.09
	7 Social Security tips: — 8 Allocated Tips:
	10 Dependent care benefits: — 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	420.00	12.00	420.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000058-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number:		1 Wages, tips, other compensation: 420.00 / 2 Federal Income tax withheld: 26.17
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 420.00 / 4 Social Security tax withheld: 26.04
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: JOYCE WILLIAMS	5 Medicare wages and tips: 420.00 / 6 Medicare tax withheld: 6.09
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	420.00	12.00	420.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000001-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 465-79-8669
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: NATALIE M WILLIAMS, 2102 M L K BLVD, DENVER CO 80205

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
1164.30	
3 Social Security wages	4 Social Security tax withheld
1164.30	72.19
5 Medicare wages and tips	6 Medicare tax withheld
1164.30	16.88
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1164.30		1164.30	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000001-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 465-79-8669
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: NATALIE M WILLIAMS, 2102 M L K BLVD, DENVER CO 80205

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
1164.30	
3 Social Security wages	4 Social Security tax withheld
1164.30	72.19
5 Medicare wages and tips	6 Medicare tax withheld
1164.30	16.88
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1164.30		1164.30	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000001-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 465-79-8669
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: NATALIE M WILLIAMS, 2102 M L K BLVD, DENVER CO 80205

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
1164.30	
3 Social Security wages	4 Social Security tax withheld
1164.30	72.19
5 Medicare wages and tips	6 Medicare tax withheld
1164.30	16.88
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1164.30		1164.30	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0095-13058390 0000000001-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 1164.30	2 Federal Income tax withheld
b Employer's identification number 80-0438877	a Employee's social security number 465-79-8669		3 Social Security wages 1164.30	4 Social Security tax withheld 72.19
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 1164.30	6 Medicare tax withheld 16.88
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code NATALIE M WILLIAMS 2102 M L K BLVD DENVER CO 80205	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1164.30		1164.30	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you reported to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
9540.00	
3 Social Security wages	4 Social Security tax withheld
9540.00	591.48
5 Medicare wages and tips	6 Medicare tax withheld
9540.00	138.33
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9540.00		9540.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
9540.00	
3 Social Security wages	4 Social Security tax withheld
9540.00	591.48
5 Medicare wages and tips	6 Medicare tax withheld
9540.00	138.33
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9540.00		9540.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
9540.00	
3 Social Security wages	4 Social Security tax withheld
9540.00	591.48
5 Medicare wages and tips	6 Medicare tax withheld
9540.00	138.33
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9540.00		9540.00	20.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0095-13058390 0000000009-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414		1 Wages, tips, other compensation: 9540.00 / 2 Federal Income tax withheld:
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 9540.00 / 4 Social Security tax withheld: 591.48
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips: 9540.00 / 6 Medicare tax withheld: 138.33 7 Social Security tips: / 8 Allocated Tips: 10 Dependent care benefits: / 11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9540.00		9540.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2019

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2019

d Control number	Void: X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,000 ($13,000 if you only have SIMPLE plans; $22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,000. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,000 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2019 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0095-13058390 0000000003-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-04-1936
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHERYL R WOODSON, 1775 W MOSIER PLACE #1209, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 6667.40	2 Federal Income tax withheld:
3 Social Security wages: 6667.40	4 Social Security tax withheld: 413.38
5 Medicare wages and tips: 6667.40	6 Medicare tax withheld: 96.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6667.40				

Form W-2 Wage and Tax Statement 2019 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0095-13058390 0000000003-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-04-1936
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHERYL R WOODSON, 1775 W MOSIER PLACE #1209, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 6667.40	2 Federal Income tax withheld:
3 Social Security wages: 6667.40	4 Social Security tax withheld: 413.38
5 Medicare wages and tips: 6667.40	6 Medicare tax withheld: 96.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6667.40				

Form W-2 Wage and Tax Statement 2019 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0095-13058390 0000000003-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-04-1936
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CHERYL R WOODSON, 1775 W MOSIER PLACE #1209, DENVER CO 80223	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 6667.40	2 Federal Income tax withheld:
3 Social Security wages: 6667.40	4 Social Security tax withheld: 413.38
5 Medicare wages and tips: 6667.40	6 Medicare tax withheld: 96.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6667.40				

33333	a Control number 0095-13058390	For Official Use Only ▶ OMB No. 1545-0008			
b Kind of Payer (Check one)	941 [X] CT-1 [ ]	Military [ ] Hshld. emp. [ ]	943 [ ] Medicare govt. emp. [ ]	944 [ ]	
Kind of Employer (Check one)	None apply [X] State/local non-501c [ ]	501c non-govt. [ ] State/local 501c [ ]	Federal govt. [ ]	Third-party sick pay (Check if applicable) [ ]	
c Total number of Forms W-2: 35	d Establishment number	1 Wages, tips, other compensation: 155401.30	2 Federal income tax withheld: 6923.18		
e Employer identification number (EIN): 80-0438877		3 Social security wages: 155401.30	4 Social security tax withheld: 9634.87		
f Employer's name: AGGIES ANGELS CARE PROVIDERS		5 Medicare wages and tips: 155401.30	6 Medicare tax withheld: 2253.32		
14475 ROBINS DR DENVER CO 80239 g Employer's address and ZIP code		7 Social security tips	8 Allocated tips		
		9	10 Dependent care benefits		
		11 Nonqualified plans	12a Deferred compensation		
h Other EIN used this year		13 For third-party sick pay use only	12b		
15 State: Employer's state ID number		14 Income tax withheld by payer of third-party sick pay			
16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax		
Employer's contact person: LATTANY DEJANE		Employer's telephone number: (720) 318-0173	For Official Use Only		
Employer's fax number		Employer's email address			

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ REFERENCE COPY PREPARED BY PAYCHEX. Title ▶ DO NOT FILE. Date ▶

Form **W-3** Transmittal of Wage and Tax Statements **2019**

Department of the Treasury
Internal Revenue Service

DO NOT FILE

YOUR FEDERAL W-2 & W-3 DATA IS FILED ELECTRONICALLY

33333	a Control number: 0095-13058390	For Official Use Only ▶ OMB No. 1545-0008

b Kind of Payer (Check one): 941 [X] · Military [ ] · 943 [ ] · 944 [ ] · CT-1 [ ] · Hshld. emp. [ ] · Medicare govt. emp. [ ]

Kind of Employer (Check one): None apply [ ] · 501c non-govt. [ ] · State/local non-501c [X] · State/local 501c [ ] · Federal govt. [ ]

Third-party sick pay (Check if applicable) [ ]

c Total number of Forms W-2: 35	d Establishment number	1 Wages, tips, other compensation: 155401.30	2 Federal income tax withheld: 6923.18
e Employer identification number (EIN): 80-0438877		3 Social security wages: 155401.30	4 Social security tax withheld: 9634.87
f Employer's name: AGGIES ANGELS CARE PROVIDERS		5 Medicare wages and tips: 155401.30	6 Medicare tax withheld: 2253.32
14475 ROBINS DR DENVER CO 80239		7 Social security tips	8 Allocated tips
		9	10 Dependent care benefits
g Employer's address and ZIP code		11 Nonqualified plans	12a Deferred compensation
h Other EIN used this year		13 For third-party sick pay use only	12b
15 State	Employer's state ID number	14 Income tax withheld by payer of third-party sick pay	
16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
Employer's contact person: LATTANY DEJANE		Employer's telephone number: (720) 318-0173	For Official Use Only
Employer's fax number		Employer's email address	

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ REFERENCE COPY PREPARED BY PAYCHEX. Title ▶ DO NOT FILE. Date ▶

Form **W-3 Transmittal of Wage and Tax Statements** **2019**

Department of the Treasury
Internal Revenue Service

DO NOT FILE

YOUR FEDERAL W-2 & W-3 DATA IS FILED ELECTRONICALLY

Do Not Staple 6969

Form 1096 Department of the Treasury Internal Revenue Service	**Annual Summary and Transmittal of U.S. Information Returns**	OMB No. 1545-0108 **2020**

FILER'S name
AGGIES ANGELS CARE PROVIDERS

Street address (including room or suite number)
14475 ROBINS DR

City or town, state or province, country, and ZIP or foreign postal code
DENVER CO 80239

Name of person to contact	Telephone number
LATTANY DEJANE	7203180173
Email address	Fax number

1 Employer identification number	**2** Social security number	**3** Total number of forms	**4** Federal income tax withheld	**5** Total amount reported with this Form 1096
80-0438877		5		44558.00

6 Enter an "X" in only one box below to indicate the type of form being filed.

W-2G 32	1097-BTC 50	1098 81	1098-C 78	1098--E 84	1098--F 03	1098--Q 74	1098---T 83	1099--A 80	1099--B 79	1099--C 85	1099--CAP 73	1099--DIV 91	1099--G 86	1099--INT 92	1099--K 10	1099--LS 16
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

1099-LTC 93	1099-MISC 95	1099-NEC 71	1099-OID 96	1099-PATR 97	1099-Q 31	1099-QA 1A	1099-R 98	1099-S 75	1099--SA 94	1099--SB 43	3921 25	3922 26	5498 28	5498-ESA 72	5498-QA 2A	5498-SA 27
☐	☐	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

REFERENCE COPY PREPARED BY PAYCHEX DO NOT FILE

Signature Title Date

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-87-9194	0065-13058390 - 15 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 14248.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 14248.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	524-02-5323	0065-13058390 - 48 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 6916.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 6916.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-95-1873	0065-13058390 - 26 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

TENEA T LATTANY
4699 KITTRIDGE

DENVER CO 80239

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 13074.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 13074.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	449-25-6930	0065-13058390 - 25 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

DEMETRIA D SKIPPER
4155 E IOWA # 103

DENVER CO 80222

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 10188.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 10188.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	489-60-6403	0065-13058390 - 72 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 132.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 132.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You may also have a filing requirement. See the Instructions for Form 8938.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows nonemployee compensation and/or nonqualified deferred compensation (NQDC). If you are in the trade or business of catching fish, box 1 may show cash you received for the sale of fish. If the amount in this box is self-employment (SE) income, report it on Schedule C or F (Form 1040 or 1040-SR), and complete Schedule SE (Form 1040 or 1040-SR). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line (on Schedule 1 (Form 1040 or 1040-SR); or on Form 1040-NR).

The amounts being reported as NQDC are includible in gross income for failure to meet the requirements under section 409A. This amount is also reported on Form 1099-MISC for additional tax calculation. See the Instructions for Forms 1040 and 1040-SR, or the Instructions for Form 1040-NR.

Box 2. Reserved.

Box 3. Reserved.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-87-9194	0065-13058390 - 15 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 14248.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-87-9194	0065-13058390 - 15 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 14248.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 14248.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-87-9194	0065-13058390 - 15 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 14248.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You may also have a filing requirement. See the Instructions for Form 8938.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows nonemployee compensation and/or nonqualified deferred compensation (NQDC). If you are in the trade or business of catching fish, box 1 may show cash you received for the sale of fish. If the amount in this box is self-employment (SE) income, report it on Schedule C or F (Form 1040 or 1040-SR), and complete Schedule SE (Form 1040 or 1040-SR). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line (on Schedule 1 (Form 1040 or 1040-SR); or on Form 1040-NR).

The amounts being reported as NQDC are includible in gross income for failure to meet the requirements under section 409A. This amount is also reported on Form 1099-MISC for additional tax calculation. See the Instructions for Forms 1040 and 1040-SR, or the Instructions for Form 1040-NR.

Box 2. Reserved.

Box 3. Reserved.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR 2020	PAYER'S TIN 80-0438877	RECIPIENT'S TIN 522-87-9194	Account number (see instructions) 0065-13058390 - 15 21001	FATCA filing ☐
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **AGGIES ANGELS CARE PROVIDERS** **14475 ROBINS DR** **DENVER, CO 80239**		RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code **ZIPPORAH ARRINGTON**		This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
1 Nonemployee Compensation $ **14248.00**	2	3	4 Federal income tax withheld $	
	5 State tax withheld $	6 State/Payer's state no. **CO/30941838**	7 State income $ **14248.00**	

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR 2020	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing ☐
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code		This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
1 Nonemployee Compensation $	2	3	4 Federal income tax withheld $	
	5 State tax withheld $	6 State/Payer's state no.	7 State income $	

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR 2020	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing ☐
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code		This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
1 Nonemployee Compensation $	2	3	4 Federal income tax withheld $	
	5 State tax withheld $	6 State/Payer's state no.	7 State income $	

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You may also have a filing requirement. See the Instructions for Form 8938.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows nonemployee compensation and/or nonqualified deferred compensation (NQDC). If you are in the trade or business of catching fish, box 1 may show cash you received for the sale of fish. If the amount in this box is self-employment (SE) income, report it on Schedule C or F (Form 1040 or 1040-SR), and complete Schedule SE (Form 1040 or 1040-SR). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line (on Schedule 1 (Form 1040 or 1040-SR); or on Form 1040-NR).

The amounts being reported as NQDC are includible in gross income for failure to meet the requirements under section 409A. This amount is also reported on Form 1099-MISC for additional tax calculation. See the Instructions for Forms 1040 and 1040-SR, or the Instructions for Form 1040-NR.

Box 2. Reserved.

Box 3. Reserved.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	524-02-5323	0065-13058390 - 48 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code	
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER, CO 80239	RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 6916.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	524-02-5323	0065-13058390 - 48 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code	
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER, CO 80239	RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 6916.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 6916.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	524-02-5323	0065-13058390 - 48 21001	☐

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$ 6916.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

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Boxes 5–7. State income tax withheld reporting boxes.

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	524-02-5323	0065-13058390 - 48 21001	☐

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1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 6916.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 6916.00

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020				☐

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1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-95-1873	0065-13058390 - 26 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code	
AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER, CO 80239	TENEA T LATTANY 4699 KITTRIDGE DENVER CO 80239	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 13074.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-95-1873	0065-13058390 - 26 21001	☐

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1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 13074.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 13074.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-95-1873	0065-13058390 - 26 21001	☐

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	522-95-1873	0065-13058390 - 26 21001	☐

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	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 13074.00

Form 1099 - NEC **Nonemployee Compensation** [X] VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020				☐

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1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** [X] VOID ☐ CORRECTED

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	449-25-6930	0065-13058390 - 25 21001	☐

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AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER, CO 80239	DEMETRIA D SKIPPER 4155 E IOWA # 103 DENVER CO 80222	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 10188.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

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	$	CO/30941838	$ 10188.00

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	$	CO/30941838	$ 10188.00

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

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2020				☐

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1 Nonemployee Compensation	2	3	4 Federal income tax withheld
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Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows nonemployee compensation and/or nonqualified deferred compensation (NQDC). If you are in the trade or business of catching fish, box 1 may show cash you received for the sale of fish. If the amount in this box is self-employment (SE) income, report it on Schedule C or F (Form 1040 or 1040-SR), and complete Schedule SE (Form 1040 or 1040-SR). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line (on Schedule 1 (Form 1040 or 1040-SR); or on Form 1040-NR).

The amounts being reported as NQDC are includible in gross income for failure to meet the requirements under section 409A. This amount is also reported on Form 1099-MISC for additional tax calculation. See the Instructions for Forms 1040 and 1040-SR, or the Instructions for Form 1040-NR.

Box 2. Reserved.

Box 3. Reserved.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	489-60-6403	0065-13058390 - 72 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 132.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	489-60-6403	0065-13058390 - 72 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 132.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 132.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	489-60-6403	0065-13058390 - 72 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 132.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You may also have a filing requirement. See the Instructions for Form 8938.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows nonemployee compensation and/or nonqualified deferred compensation (NQDC). If you are in the trade or business of catching fish, box 1 may show cash you received for the sale of fish. If the amount in this box is self-employment (SE) income, report it on Schedule C or F (Form 1040 or 1040-SR), and complete Schedule SE (Form 1040 or 1040-SR). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line (on Schedule 1 (Form 1040 or 1040-SR); or on Form 1040-NR).

The amounts being reported as NQDC are includible in gross income for failure to meet the requirements under section 409A. This amount is also reported on Form 1099-MISC for additional tax calculation. See the Instructions for Forms 1040 and 1040-SR, or the Instructions for Form 1040-NR.

Box 2. Reserved.

Box 3. Reserved.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020	80-0438877	489-60-6403	0065-13058390 - 72 21001	☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$ 132.00			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$	CO/30941838	$ 132.00

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	FATCA filing
2020				☐

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2	3	4 Federal income tax withheld
$			$
	5 State tax withheld	6 State/Payer's state no.	7 State income
	$		$

0065-13058390

Form **940 for 2020:** **Employer's Annual Federal Unemployment (FUTA) Tax Return**
Department of the Treasury - Internal Revenue Service

850113

OMB No. 1545-0028

Employer identification number (EIN): 80-0438877

Name *(not your trade name)*: AGGIES ANGELS CARE PROVIDERS

Trade name *(if any)*:

Address: 14475 ROBINS DR
Number Street | Suite or room number

DENVER | CO | 80239
City | State | ZIP code

Foreign country name | Foreign province/county | Foreign postal code

Type of Return (Check all that apply.)

- ☐ **a.** Amended
- ☐ **b.** Successor employer
- ☐ **c.** No payments to employees in 2020
- ☐ **d.** Final: Business closed or stopped paying wages

Go to *www.irs.gov/form940* for instructions and the latest information.

Read the separate instructions before you complete this form. Please type or print within the boxes.

Part 1: Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1.

1a **If you had to pay state unemployment tax in one state only, enter the state abbreviation** . . . 1a: CO
Check Here

1b **If you had to pay state unemployment tax in more than one state, you are a multi-state employer** . . . 1b ☐ Complete Schedule A (Form 940).

2 **If you paid wages in a state that is subject to CREDIT REDUCTION** . . . 2 ☐ Check here. Complete Schedule A (Form 940).

Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank.

3 **Total payments to all employees** . . . 3: 131002.35

4 **Payments exempt from FUTA tax** . . . 4:

Check all that apply: 4a ☐ Fringe benefits; 4b ☐ Group-term life insurance; 4c ☐ Retirement/Pension; 4d ☐ Dependent care; 4e ☐ Other

5 **Total of payments made to each employee in excess of $7,000** . . . 5: 21154.50

6 **Subtotal** (line 4 + line 5 = line 6) . . . 6: 21154.50

7 **Total taxable FUTA wages** (line 3 - line 6 = line 7). See instructions . . . 7: 109847.85

8 **FUTA tax before adjustments** (line 7 x 0.006 = line 8) . . . 8: 659.09

Part 3: Determine your adjustments. If any line does NOT apply, leave it blank.

9 **If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054** (line 7 x 0.054 = line 9). Go to line 12 . . . 9:

10 **If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late** (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . . . 10:

11 **If credit reduction applies,** enter the total from Schedule A (Form 940) . . . 11:

Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank.

12 **Total FUTA tax after adjustments** (lines 8 + 9 + 10 + 11 = line 12) . . . 12: 659.09

13 **FUTA tax deposited for the year, including any overpayment applied from a prior year** . . . 13: 659.09

14 **Balance due** If line 12 is more than line 13, enter the excess on line 14.
- If line 14 is more than $500, you must deposit your tax.
- If line 14 is $500 or less, you may pay with this return. See instructions . . . 14:

15 **Overpayment** If line 13 is more than line 12, enter the excess on line 15 and check a box below . . . 15:

► You **MUST** complete both pages of this form and **SIGN** it. Check one: ☐ Apply to next return. ☐ Send a refund.

Next ➡

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 11234O Form **940** (2020)

850212

Name *(not your trade name)* AGGIES ANGELS CARE PROVIDERS

Employer identification number (EIN) 80-0438877

Part 5: Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.

16 Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.

16a 1st quarter (January 1 - March 31)	**16a**	212.02
16b 2nd quarter (April 1 - June 30)	**16b**	179.94
16c 3rd quarter (July 1 - September 30)	**16c**	147.27
16d 4th quarter (October 1 - December 31)	**16d**	119.86
17 Total tax liability for the year (lines 16a + 16b + 16c + 16d = line 17)	**17**	659.09

Total must equal line 12.

Part 6: May we speak with your third-party designee?

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☐ **Yes.** Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS ☐☐☐☐☐

☐ **No.**

Part 7: Sign here. You MUST complete both pages of this form and SIGN it.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X Sign your name here

Print your name here: REFERENCE COPY PREPARED

Print your title here: BY PAYCHEX. DO NOT FILE

Date

Best daytime phone

Paid preparer use only

Check if you are self-employed ☐

Preparer's name

PTIN

Preparer's signature

Date / /

Firm's name (or yours if self-employed)

EIN

Address

Phone ( ) -

City

State

ZIP code

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****************************************
*           CLIENT  13058390           *
*                                      *
*  THESE ARE YOUR W2 REFERENCE COPIES.  *
*  KEEP THESE COPIES FOR 4 YEARS.       *
*  DO NOT DISTRIBUTE TO YOUR EMPLOYEES. *
****************************************
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Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE 21001

d Control number 0065-13058390 0000000067-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 509-72-0548
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 6500.00	2 Federal income tax withheld 302.30
3 Social security wages 6500.00	4 Social security tax withheld 403.00
5 Medicare wages and tips 6500.00	6 Medicare tax withheld 94.25
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6500.00	139.00	6500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000024-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-86-3393
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5748.00	2 Federal income tax withheld
3 Social security wages 5748.00	4 Social security tax withheld 356.38
5 Medicare wages and tips 5748.00	6 Medicare tax withheld 83.35
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5748.00		5748.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000004-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-08-1495
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 6955.80	2 Federal income tax withheld
3 Social security wages 6955.80	4 Social security tax withheld 431.26
5 Medicare wages and tips 6955.80	6 Medicare tax withheld 100.86
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6955.80	95.00	6955.80	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000061-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 652-18-9173
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ELIJAH J DURANT 3311 CHASE ST WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 1332.00	2 Federal income tax withheld 85.71
3 Social security wages 1332.00	4 Social security tax withheld 82.58
5 Medicare wages and tips 1332.00	6 Medicare tax withheld 19.31
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1332.00	39.00	1332.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE 21001

d Control number 0065-13058390 0000000006-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 524-87-3130		1 Wages, tips, other compensation 8640.00	2 Federal income tax withheld 54.00		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 8640.00	4 Social security tax withheld 535.68		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code MIRNA FLORES	5 Medicare wages and tips 8640.00	6 Medicare tax withheld 125.28		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8640.00	24.00	8640.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000019-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 524-13-8337		1 Wages, tips, other compensation 5294.70	2 Federal income tax withheld 339.51		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 5294.70	4 Social security tax withheld 328.27		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips 5294.70	6 Medicare tax withheld 76.77		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5294.70	155.00	5294.70	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000055-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 521-19-2891		1 Wages, tips, other compensation 16752.00	2 Federal income tax withheld 1240.38		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 16752.00	4 Social security tax withheld 1038.62		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	5 Medicare wages and tips 16752.00	6 Medicare tax withheld 242.90		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	16752.00	560.00	16752.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000056-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number 80-0438877 / a Employee's social security number 652-12-0504		1 Wages, tips, other compensation 1872.00	2 Federal income tax withheld 123.88		
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal		3 Social security wages 1872.00	4 Social security tax withheld 116.06		
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010	5 Medicare wages and tips 1872.00	6 Medicare tax withheld 27.14		
		7 Social security tips	8 Allocated tips		
		10 Dependent care benefits	11 Nonqualified plans		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	58.00	1872.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE 21001

d Control number 0065-13058390 0000000064-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 514-15-1774
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3840.00	2 Federal income tax withheld 257.36
3 Social security wages 3840.00	4 Social security tax withheld 238.08
5 Medicare wages and tips 3840.00	6 Medicare tax withheld 55.68
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3840.00	121.00	3840.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000014-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-95-1873
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 1040.00	2 Federal income tax withheld 26.42
3 Social security wages 1040.00	4 Social security tax withheld 64.48
5 Medicare wages and tips 1040.00	6 Medicare tax withheld 15.08
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1040.00	13.00	1040.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000021-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-88-9226
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5328.00	2 Federal income tax withheld 342.84
3 Social security wages 5328.00	4 Social security tax withheld 330.34
5 Medicare wages and tips 5328.00	6 Medicare tax withheld 77.26
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5328.00	156.00	5328.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000046-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 653-14-0029
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5768.00	2 Federal income tax withheld 196.88
3 Social security wages 5768.00	4 Social security tax withheld 357.62
5 Medicare wages and tips 5768.00	6 Medicare tax withheld 83.64
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5768.00	96.00	5768.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE 21001

d Control number 0065-13058390 0000000040-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 422-96-3729
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code BETTY MOORE 4463 STEEL STREET DENVER CO 80230

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 3251.00	2 Federal income tax withheld 205.25
3 Social security wages 3251.00	4 Social security tax withheld 201.56
5 Medicare wages and tips 3251.00	6 Medicare tax withheld 47.14
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3251.00	96.00	3251.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000042-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code WENDY MORALES

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 8862.50	2 Federal income tax withheld 686.25
3 Social security wages 8862.50	4 Social security tax withheld 549.48
5 Medicare wages and tips 8862.50	6 Medicare tax withheld 128.51
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8862.50	297.00	8862.50	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000052-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 522-47-0739
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 6699.20	2 Federal income tax withheld 422.36
3 Social security wages 6699.20	4 Social security tax withheld 415.35
5 Medicare wages and tips 6699.20	6 Medicare tax withheld 97.14
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6699.20	199.00	6699.20	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000071-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 651-24-8310
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5150.00	2 Federal income tax withheld 257.81
3 Social security wages 5150.00	4 Social security tax withheld 319.30
5 Medicare wages and tips 5150.00	6 Medicare tax withheld 74.68
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5150.00	115.00	5150.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE 21001

d Control number 0065-13058390 0000000070-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 524-47-7126
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code SPENCER SHELTON 18570 E HARVARD DR AURORA CO 80013

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
9720.00	
3 Social security wages	4 Social security tax withheld
9720.00	602.64
5 Medicare wages and tips	6 Medicare tax withheld
9720.00	140.94
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9720.00	148.00	9720.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000063-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-55-8220
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code ROSHAD SMITH 4463 STEELE ST DENVER CO 80216

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
2190.40	139.89
3 Social security wages	4 Social security tax withheld
2190.40	135.80
5 Medicare wages and tips	6 Medicare tax withheld
2190.40	31.76
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2190.40	64.00	2190.40	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000022-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4047
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
5429.75	
3 Social security wages	4 Social security tax withheld
5429.75	336.64
5 Medicare wages and tips	6 Medicare tax withheld
5429.75	78.73
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5429.75	122.00	5429.75	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000020-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 572-91-2194
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code ANGEL VIGIL 5165 W COLGATE PLACE DENVER CO 80236

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal income tax withheld
12180.00	494.62
3 Social security wages	4 Social security tax withheld
12180.00	755.16
5 Medicare wages and tips	6 Medicare tax withheld
12180.00	176.61
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12180.00	234.00	12180.00	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE 21001

d Control number 0065-13058390 0000000038-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 523-61-7950
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code DEREK WASHINGTON 23771 E ALABAMA DR AURORA CO 80018	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 2499.00	2 Federal income tax withheld 170.75
3 Social security wages 2499.00	4 Social security tax withheld 154.94
5 Medicare wages and tips 2499.00	6 Medicare tax withheld 36.24
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2499.00	79.00	2499.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000009-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 510-76-6414
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 5550.00	2 Federal income tax withheld
3 Social security wages 5550.00	4 Social security tax withheld 344.10
5 Medicare wages and tips 5550.00	6 Medicare tax withheld 80.48
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5550.00		5550.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 0000000073-0000W2 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number 445-84-0130
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 400.00	2 Federal income tax withheld
3 Social security wages 400.00	4 Social security tax withheld 24.80
5 Medicare wages and tips 400.00	6 Medicare tax withheld 5.80
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	400.00	11.00	400.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — EMPLOYER REFERENCE COPY – DO NOT FILE

d Control number 0065-13058390 Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number 80-0438877	a Employee's social security number
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal X	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation 131002.35	2 Federal income tax withheld 5346.21
3 Social security wages 131002.35	4 Social security tax withheld 8122.14
5 Medicare wages and tips 131002.35	6 Medicare tax withheld 1899.55
7 Social security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	131002.35	2821.00	131002.35	368.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000067-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 509-72-0548
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SHIRLY ANDERSON, 12565 ALBROOK DR #3701, DENVER CO 80239	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 6500.00	2 Federal Income tax withheld: 302.30
3 Social Security wages: 6500.00	4 Social Security tax withheld: 403.00
5 Medicare wages and tips: 6500.00	6 Medicare tax withheld: 94.25
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6500.00	139.00	6500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000067-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 509-72-0548
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SHIRLY ANDERSON, 12565 ALBROOK DR #3701, DENVER CO 80239	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 6500.00	2 Federal Income tax withheld: 302.30
3 Social Security wages: 6500.00	4 Social Security tax withheld: 403.00
5 Medicare wages and tips: 6500.00	6 Medicare tax withheld: 94.25
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6500.00	139.00	6500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000067-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 509-72-0548
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SHIRLY ANDERSON, 12565 ALBROOK DR #3701, DENVER CO 80239	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 6500.00	2 Federal Income tax withheld: 302.30
3 Social Security wages: 6500.00	4 Social Security tax withheld: 403.00
5 Medicare wages and tips: 6500.00	6 Medicare tax withheld: 94.25
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6500.00	139.00	6500.00	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000067-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 6500.00	2 Federal Income tax withheld 302.30
b Employer's identification number 80-0438877	a Employee's social security number 509-72-0548		3 Social Security wages 6500.00	4 Social Security tax withheld 403.00
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 6500.00	6 Medicare tax withheld 94.25
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6500.00	139.00	6500.00	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000024-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 5748.00	2 Federal Income tax withheld:
3 Social Security wages: 5748.00	4 Social Security tax withheld: 356.38
5 Medicare wages and tips: 5748.00	6 Medicare tax withheld: 83.35
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5748.00		5748.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000024-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 5748.00	2 Federal Income tax withheld:
3 Social Security wages: 5748.00	4 Social Security tax withheld: 356.38
5 Medicare wages and tips: 5748.00	6 Medicare tax withheld: 83.35
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5748.00		5748.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000024-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-86-3393
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 5748.00	2 Federal Income tax withheld:
3 Social Security wages: 5748.00	4 Social Security tax withheld: 356.38
5 Medicare wages and tips: 5748.00	6 Medicare tax withheld: 83.35
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5748.00		5748.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000024-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 5748.00	2 Federal Income tax withheld
b Employer's identification number 80-0438877	a Employee's social security number 523-86-3393		3 Social Security wages 5748.00	4 Social Security tax withheld 356.38
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 5748.00	6 Medicare tax withheld 83.35
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5748.00		5748.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.
Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.
B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.
C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)
D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.
E—Elective deferrals under a section 403(b) salary reduction agreement
F—Elective deferrals under a section 408(k)(6) salary reduction SEP
G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan
H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.
J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.
L—Substantiated employee business expense reimbursements (nontaxable)
M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .
N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.
P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)
Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.
R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.
S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)
T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.
V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.
W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).
Y—Deferrals under a section 409A nonqualified deferred compensation plan
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.
AA—Designated Roth contributions under a section 401(k) plan
BB—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**
EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reimbursement arrangement
GG—Income from qualified equity grants under section 83(i)
HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000004-0000W2
Void
b Employer's identification number: 80-0438877
a Employee's social security number: 524-08-1495
13 Statutory Employee | Retirement plan | Third-party sick pay
12 See Instrs. for Box 12
14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239
Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
6955.80	
3 Social Security wages	**4 Social Security tax withheld**
6955.80	431.26
5 Medicare wages and tips	**6 Medicare tax withheld**
6955.80	100.86
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6955.80	95.00	6955.80	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000004-0000W2
Void
b Employer's identification number: 80-0438877
a Employee's social security number: 524-08-1495
13 Statutory Employee | Retirement plan | Third-party sick pay
12 See Instrs. for Box 12
14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239
Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
6955.80	
3 Social Security wages	**4 Social Security tax withheld**
6955.80	431.26
5 Medicare wages and tips	**6 Medicare tax withheld**
6955.80	100.86
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6955.80	95.00	6955.80	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000004-0000W2
Void
b Employer's identification number: 80-0438877
a Employee's social security number: 524-08-1495
13 Statutory Employee | Retirement plan | Third-party sick pay
12 See Instrs. for Box 12
14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY, 5095 EAGLE STREET, DENVER CO 80239
Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
6955.80	
3 Social Security wages	**4 Social Security tax withheld**
6955.80	431.26
5 Medicare wages and tips	**6 Medicare tax withheld**
6955.80	100.86
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6955.80	95.00	6955.80	22.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000004-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 524-08-1495				1 Wages, tips, other compensation: 6955.80	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages: 6955.80	4 Social Security tax withheld: 431.26	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239			5 Medicare wages and tips: 6955.80	6 Medicare tax withheld: 100.86	
					7 Social Security tips:	8 Allocated Tips:	
					10 Dependent care benefits:	11 Nonqualified plans:	
					Verification Code:		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6955.80	95.00	6955.80	22.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:	
					7 Social Security tips:	8 Allocated Tips:	
					10 Dependent care benefits:	11 Nonqualified plans:	
					Verification Code:		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:	
					7 Social Security tips:	8 Allocated Tips:	
					10 Dependent care benefits:	11 Nonqualified plans:	
					Verification Code:		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000061-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-18-9173
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ELIJAH J DURANT, 3311 CHASE ST, WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
1332.00	85.71
3 Social Security wages	**4 Social Security tax withheld**
1332.00	82.58
5 Medicare wages and tips	**6 Medicare tax withheld**
1332.00	19.31
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1332.00	39.00	1332.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000061-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-18-9173
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ELIJAH J DURANT, 3311 CHASE ST, WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
1332.00	85.71
3 Social Security wages	**4 Social Security tax withheld**
1332.00	82.58
5 Medicare wages and tips	**6 Medicare tax withheld**
1332.00	19.31
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1332.00	39.00	1332.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000061-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 652-18-9173
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ELIJAH J DURANT, 3311 CHASE ST, WHEAT RIDGE CO 80212	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
1332.00	85.71
3 Social Security wages	**4 Social Security tax withheld**
1332.00	82.58
5 Medicare wages and tips	**6 Medicare tax withheld**
1332.00	19.31
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1332.00	39.00	1332.00	6.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000061-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 1332.00	2 Federal Income tax withheld 85.71
b Employer's identification number 80-0438877	a Employee's social security number 652-18-9173		3 Social Security wages 1332.00	4 Social Security tax withheld 82.58
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 1332.00	6 Medicare tax withheld 19.31
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code ELIJAH J DURANT 3311 CHASE ST WHEAT RIDGE CO 80212	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1332.00	39.00	1332.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000006-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: MIRNA FLORES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 8640.00	2 Federal Income tax withheld: 54.00
3 Social Security wages: 8640.00	4 Social Security tax withheld: 535.68
5 Medicare wages and tips: 8640.00	6 Medicare tax withheld: 125.28
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8640.00	24.00	8640.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000006-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: MIRNA FLORES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 8640.00	2 Federal Income tax withheld: 54.00
3 Social Security wages: 8640.00	4 Social Security tax withheld: 535.68
5 Medicare wages and tips: 8640.00	6 Medicare tax withheld: 125.28
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8640.00	24.00	8640.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000006-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-87-3130
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: MIRNA FLORES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 8640.00	2 Federal Income tax withheld: 54.00
3 Social Security wages: 8640.00	4 Social Security tax withheld: 535.68
5 Medicare wages and tips: 8640.00	6 Medicare tax withheld: 125.28
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8640.00	24.00	8640.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000006-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 8640.00	2 Federal Income tax withheld 54.00
b Employer's identification number 80-0438877	a Employee's social security number 524-87-3130		3 Social Security wages 8640.00	4 Social Security tax withheld 535.68
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 8640.00	6 Medicare tax withheld 125.28
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code MIRNA FLORES	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8640.00	24.00	8640.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000019-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 524-13-8337
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 5294.70	2 Federal Income tax withheld: 339.51
3 Social Security wages: 5294.70	4 Social Security tax withheld: 328.27
5 Medicare wages and tips: 5294.70	6 Medicare tax withheld: 76.77
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5294.70	155.00	5294.70	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000019-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 524-13-8337
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 5294.70	2 Federal Income tax withheld: 339.51
3 Social Security wages: 5294.70	4 Social Security tax withheld: 328.27
5 Medicare wages and tips: 5294.70	6 Medicare tax withheld: 76.77
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5294.70	155.00	5294.70	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000019-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 524-13-8337
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 5294.70	2 Federal Income tax withheld: 339.51
3 Social Security wages: 5294.70	4 Social Security tax withheld: 328.27
5 Medicare wages and tips: 5294.70	6 Medicare tax withheld: 76.77
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5294.70	155.00	5294.70	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000019-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 5294.70	2 Federal Income tax withheld 339.51
b Employer's identification number 80-0438877	a Employee's social security number 524-13-8337		3 Social Security wages 5294.70	4 Social Security tax withheld 328.27
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 5294.70	6 Medicare tax withheld 76.77
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5294.70	155.00	5294.70	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000055-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 16752.00	2 Federal Income tax withheld: 1240.38
3 Social Security wages: 16752.00	4 Social Security tax withheld: 1038.62
5 Medicare wages and tips: 16752.00	6 Medicare tax withheld: 242.90
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	16752.00	560.00	16752.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000055-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 16752.00	2 Federal Income tax withheld: 1240.38
3 Social Security wages: 16752.00	4 Social Security tax withheld: 1038.62
5 Medicare wages and tips: 16752.00	6 Medicare tax withheld: 242.90
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	16752.00	560.00	16752.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000055-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
12 See Instrs. for Box 12	14 Other
e Employee's name, address, and ZIP code: WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 16752.00	2 Federal Income tax withheld: 1240.38
3 Social Security wages: 16752.00	4 Social Security tax withheld: 1038.62
5 Medicare wages and tips: 16752.00	6 Medicare tax withheld: 242.90
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	16752.00	560.00	16752.00	20.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0065-13058390 0000000055-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 521-19-2891		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: WILLIAM HAYES 363 GENEVA ST APT A AURORA CO 80010	

1 Wages, tips, other compensation	2 Federal Income tax withheld
16752.00	1240.38
3 Social Security wages	**4 Social Security tax withheld**
16752.00	1038.62
5 Medicare wages and tips	**6 Medicare tax withheld**
16752.00	242.90
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	16752.00	560.00	16752.00	20.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.
Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.
B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.
C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)
D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.
E—Elective deferrals under a section 403(b) salary reduction agreement
F—Elective deferrals under a section 408(k)(6) salary reduction SEP
G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan
H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.
J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.
L—Substantiated employee business expense reimbursements (nontaxable)
M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .
N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.
P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)
Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.
R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.
S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)
T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.
V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.
W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).
Y—Deferrals under a section 409A nonqualified deferred compensation plan
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.
AA—Designated Roth contributions under a section 401(k) plan
BB—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**
EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reimbursement arrangement
GG—Income from qualified equity grants under section 83(i)
HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

Field	Value
d Control number	0065-13058390 0000000056-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	652-12-0504
13 Statutory Employee / Retirement plan / Third-party sick pay	
1 Wages, tips, other compensation	1872.00
2 Federal Income tax withheld	123.88
3 Social Security wages	1872.00
4 Social Security tax withheld	116.06
5 Medicare wages and tips	1872.00
6 Medicare tax withheld	27.14
7 Social Security tips	
8 Allocated Tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	58.00	1872.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

Field	Value
d Control number	0065-13058390 0000000056-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	652-12-0504
13 Statutory Employee / Retirement plan / Third-party sick pay	
1 Wages, tips, other compensation	1872.00
2 Federal Income tax withheld	123.88
3 Social Security wages	1872.00
4 Social Security tax withheld	116.06
5 Medicare wages and tips	1872.00
6 Medicare tax withheld	27.14
7 Social Security tips	
8 Allocated Tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	58.00	1872.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

Field	Value
d Control number	0065-13058390 0000000056-0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer's identification number	80-0438877
a Employee's social security number	652-12-0504
13 Statutory Employee / Retirement plan / Third-party sick pay	
1 Wages, tips, other compensation	1872.00
2 Federal Income tax withheld	123.88
3 Social Security wages	1872.00
4 Social Security tax withheld	116.06
5 Medicare wages and tips	1872.00
6 Medicare tax withheld	27.14
7 Social Security tips	
8 Allocated Tips	
10 Dependent care benefits	
11 Nonqualified plans	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	58.00	1872.00	4.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0065-13058390 0000000056-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 652-12-0504		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: CHEYENNE JACKSON 363 GENEVA ST APT A AURORA CO 80010	

1 Wages, tips, other compensation	2 Federal Income tax withheld
1872.00	123.88
3 Social Security wages	**4 Social Security tax withheld**
1872.00	116.06
5 Medicare wages and tips	**6 Medicare tax withheld**
1872.00	27.14
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	58.00	1872.00	4.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000064-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 3840.00	2 Federal Income tax withheld: 257.36
3 Social Security wages: 3840.00	4 Social Security tax withheld: 238.08
5 Medicare wages and tips: 3840.00	6 Medicare tax withheld: 55.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3840.00	121.00	3840.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000064-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 3840.00	2 Federal Income tax withheld: 257.36
3 Social Security wages: 3840.00	4 Social Security tax withheld: 238.08
5 Medicare wages and tips: 3840.00	6 Medicare tax withheld: 55.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3840.00	121.00	3840.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000064-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 3840.00	2 Federal Income tax withheld: 257.36
3 Social Security wages: 3840.00	4 Social Security tax withheld: 238.08
5 Medicare wages and tips: 3840.00	6 Medicare tax withheld: 55.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3840.00	121.00	3840.00	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000064-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 514-15-1774				1 Wages, tips, other compensation: 3840.00	2 Federal Income tax withheld: 257.36	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages: 3840.00	4 Social Security tax withheld: 238.08	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: JAIZIONNE JACKSON 1190 S SHERIDON BLVD APT 11 DENVER CO 80232			5 Medicare wages and tips: 3840.00	6 Medicare tax withheld: 55.68	
					7 Social Security tips:	8 Allocated Tips:	
					10 Dependent care benefits:	11 Nonqualified plans:	
					Verification Code:		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3840.00	121.00	3840.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:	
					7 Social Security tips:	8 Allocated Tips:	
					10 Dependent care benefits:	11 Nonqualified plans:	
					Verification Code:		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:	
					7 Social Security tips:	8 Allocated Tips:	
					10 Dependent care benefits:	11 Nonqualified plans:	
					Verification Code:		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000014-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 1040.00	2 Federal Income tax withheld: 26.42
3 Social Security wages: 1040.00	4 Social Security tax withheld: 64.48
5 Medicare wages and tips: 1040.00	6 Medicare tax withheld: 15.08
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1040.00	13.00	1040.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000014-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 1040.00	2 Federal Income tax withheld: 26.42
3 Social Security wages: 1040.00	4 Social Security tax withheld: 64.48
5 Medicare wages and tips: 1040.00	6 Medicare tax withheld: 15.08
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1040.00	13.00	1040.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000014-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 1040.00	2 Federal Income tax withheld: 26.42
3 Social Security wages: 1040.00	4 Social Security tax withheld: 64.48
5 Medicare wages and tips: 1040.00	6 Medicare tax withheld: 15.08
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1040.00	13.00	1040.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0065-13058390 0000000014-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 522-95-1873		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code: TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	

1 Wages, tips, other compensation	2 Federal Income tax withheld
1040.00	26.42
3 Social Security wages	**4 Social Security tax withheld**
1040.00	64.48
5 Medicare wages and tips	**6 Medicare tax withheld**
1040.00	15.08
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1040.00	13.00	1040.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000021-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5328.00	342.84
3 Social Security wages	**4 Social Security tax withheld**
5328.00	330.34
5 Medicare wages and tips	**6 Medicare tax withheld**
5328.00	77.26
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5328.00	156.00	5328.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000021-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5328.00	342.84
3 Social Security wages	**4 Social Security tax withheld**
5328.00	330.34
5 Medicare wages and tips	**6 Medicare tax withheld**
5328.00	77.26
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5328.00	156.00	5328.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000021-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-88-9226
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: THERESA LOVATO, 3051 S GOLDEN WAY, DENVER CO 80226	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5328.00	342.84
3 Social Security wages	**4 Social Security tax withheld**
5328.00	330.34
5 Medicare wages and tips	**6 Medicare tax withheld**
5328.00	77.26
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5328.00	156.00	5328.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000021-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 5328.00	2 Federal Income tax withheld 342.84
b Employer's identification number 80-0438877	a Employee's social security number 524-88-9226		3 Social Security wages 5328.00	4 Social Security tax withheld 330.34
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 5328.00	6 Medicare tax withheld 77.26
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5328.00	156.00	5328.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000046-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 5768.00	2 Federal Income tax withheld: 196.88
3 Social Security wages: 5768.00	4 Social Security tax withheld: 357.62
5 Medicare wages and tips: 5768.00	6 Medicare tax withheld: 83.64
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5768.00	96.00	5768.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000046-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 5768.00	2 Federal Income tax withheld: 196.88
3 Social Security wages: 5768.00	4 Social Security tax withheld: 357.62
5 Medicare wages and tips: 5768.00	6 Medicare tax withheld: 83.64
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5768.00	96.00	5768.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000046-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ, 3051 S GOLDEN WAY, DENVER CO 80227	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 5768.00	2 Federal Income tax withheld: 196.88
3 Social Security wages: 5768.00	4 Social Security tax withheld: 357.62
5 Medicare wages and tips: 5768.00	6 Medicare tax withheld: 83.64
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5768.00	96.00	5768.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000046-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 653-14-0029		1 Wages, tips, other compensation: 5768.00 / 2 Federal Income tax withheld: 196.88
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages: 5768.00 / 4 Social Security tax withheld: 357.62
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	5 Medicare wages and tips: 5768.00 / 6 Medicare tax withheld: 83.64 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5768.00	96.00	5768.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee:	Retirement plan:	Third-party sick pay:	3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:	5 Medicare wages and tips / 6 Medicare tax withheld 7 Social Security tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.
Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.
B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.
C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)
D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.
E—Elective deferrals under a section 403(b) salary reduction agreement
F—Elective deferrals under a section 408(k)(6) salary reduction SEP
G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan
H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.
J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.
L—Substantiated employee business expense reimbursements (nontaxable)
M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .
N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.
P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)
Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.
R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.
S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)
T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.
V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.
W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).
Y—Deferrals under a section 409A nonqualified deferred compensation plan
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.
AA—Designated Roth contributions under a section 401(k) plan
BB—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**
EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reimbursement arrangement
GG—Income from qualified equity grants under section 83(i)
HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number	0065-13058390 0000000040-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	422-96-3729
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	BETTY MOORE 4463 STEEL STREET DENVER CO 80230
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation	3251.00
2 Federal Income tax withheld	205.25
3 Social Security wages	3251.00
4 Social Security tax withheld	201.56
5 Medicare wages and tips	3251.00
6 Medicare tax withheld	47.14
7 Social Security tips	
8 Allocated Tips	
10 Dependent care benefits	
11 Nonqualified plans	
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3251.00	96.00	3251.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number	0065-13058390 0000000040-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	422-96-3729
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	BETTY MOORE 4463 STEEL STREET DENVER CO 80230
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation	3251.00
2 Federal Income tax withheld	205.25
3 Social Security wages	3251.00
4 Social Security tax withheld	201.56
5 Medicare wages and tips	3251.00
6 Medicare tax withheld	47.14
7 Social Security tips	
8 Allocated Tips	
10 Dependent care benefits	
11 Nonqualified plans	
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3251.00	96.00	3251.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number	0065-13058390 0000000040-0000W2
Void	
b Employer's identification number	80-0438877
a Employee's social security number	422-96-3729
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
13 Statutory Employee / Retirement plan / Third-party sick pay	
12 See Instrs. for Box 12	
14 Other	
e Employee's name, address, and ZIP code	BETTY MOORE 4463 STEEL STREET DENVER CO 80230
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation	3251.00
2 Federal Income tax withheld	205.25
3 Social Security wages	3251.00
4 Social Security tax withheld	201.56
5 Medicare wages and tips	3251.00
6 Medicare tax withheld	47.14
7 Social Security tips	
8 Allocated Tips	
10 Dependent care benefits	
11 Nonqualified plans	
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3251.00	96.00	3251.00	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0065-13058390 0000000040-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 422-96-3729		1 Wages, tips, other compensation: 3251.00 / 2 Federal Income tax withheld: 205.25
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages: 3251.00 / 4 Social Security tax withheld: 201.56
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips: 3251.00 / 6 Medicare tax withheld: 47.14
		BETTY MOORE 4463 STEEL STREET DENVER CO 80230	7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3251.00	96.00	3251.00	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		1 Wages, tips, other compensation / 2 Federal Income tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			3 Social Security wages / 4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans
			Verification Code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000042-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 8862.50	2 Federal Income tax withheld: 686.25
3 Social Security wages: 8862.50	4 Social Security tax withheld: 549.48
5 Medicare wages and tips: 8862.50	6 Medicare tax withheld: 128.51
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8862.50	297.00	8862.50	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000042-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 8862.50	2 Federal Income tax withheld: 686.25
3 Social Security wages: 8862.50	4 Social Security tax withheld: 549.48
5 Medicare wages and tips: 8862.50	6 Medicare tax withheld: 128.51
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8862.50	297.00	8862.50	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000042-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4275
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: WENDY MORALES	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 8862.50	2 Federal Income tax withheld: 686.25
3 Social Security wages: 8862.50	4 Social Security tax withheld: 549.48
5 Medicare wages and tips: 8862.50	6 Medicare tax withheld: 128.51
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8862.50	297.00	8862.50	16.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000042-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 8862.50	2 Federal Income tax withheld 686.25
b Employer's identification number 80-0438877	a Employee's social security number 523-93-4275		3 Social Security wages 8862.50	4 Social Security tax withheld 549.48
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 8862.50	6 Medicare tax withheld 128.51
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code WENDY MORALES	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	8862.50	297.00	8862.50	16.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000052-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-47-0739
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 6699.20	2 Federal Income tax withheld: 422.36
3 Social Security wages: 6699.20	4 Social Security tax withheld: 415.35
5 Medicare wages and tips: 6699.20	6 Medicare tax withheld: 97.14
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6699.20	199.00	6699.20	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000052-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-47-0739
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 6699.20	2 Federal Income tax withheld: 422.36
3 Social Security wages: 6699.20	4 Social Security tax withheld: 415.35
5 Medicare wages and tips: 6699.20	6 Medicare tax withheld: 97.14
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6699.20	199.00	6699.20	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000052-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 522-47-0739
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 6699.20	2 Federal Income tax withheld: 422.36
3 Social Security wages: 6699.20	4 Social Security tax withheld: 415.35
5 Medicare wages and tips: 6699.20	6 Medicare tax withheld: 97.14
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	6699.20	199.00	6699.20	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000052-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 522-47-0739				1 Wages, tips, other compensation: 6699.20		2 Federal Income tax withheld: 422.36	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages: 6699.20		4 Social Security tax withheld: 415.35	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219			5 Medicare wages and tips: 6699.20		6 Medicare tax withheld: 97.14	
					7 Social Security tips:		8 Allocated Tips:	
					10 Dependent care benefits:		11 Nonqualified plans:	
					Verification Code:			
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 6699.20	17 State income tax: 199.00	18 Local wages, tips, etc.: 6699.20	19 Local income tax: 24.00	20 Locality name: CO AUROR		

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:		2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:		4 Social Security tax withheld:	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:		6 Medicare tax withheld:	
					7 Social Security tips:		8 Allocated Tips:	
					10 Dependent care benefits:		11 Nonqualified plans:	
					Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:		

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:		2 Federal Income tax withheld:	
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:		4 Social Security tax withheld:	
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:		6 Medicare tax withheld:	
					7 Social Security tips:		8 Allocated Tips:	
					10 Dependent care benefits:		11 Nonqualified plans:	
					Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:		

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000071-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 651-24-8310
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DOMINGO RUIZ, 116 S ZUNI ST, DENVER CO 80223	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 5150.00	2 Federal Income tax withheld: 257.81
3 Social Security wages: 5150.00	4 Social Security tax withheld: 319.30
5 Medicare wages and tips: 5150.00	6 Medicare tax withheld: 74.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5150.00	115.00	5150.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000071-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 651-24-8310
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DOMINGO RUIZ, 116 S ZUNI ST, DENVER CO 80223	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 5150.00	2 Federal Income tax withheld: 257.81
3 Social Security wages: 5150.00	4 Social Security tax withheld: 319.30
5 Medicare wages and tips: 5150.00	6 Medicare tax withheld: 74.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5150.00	115.00	5150.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000071-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 651-24-8310
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DOMINGO RUIZ, 116 S ZUNI ST, DENVER CO 80223	
Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
1 Wages, tips, other compensation: 5150.00	2 Federal Income tax withheld: 257.81
3 Social Security wages: 5150.00	4 Social Security tax withheld: 319.30
5 Medicare wages and tips: 5150.00	6 Medicare tax withheld: 74.68
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5150.00	115.00	5150.00	8.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
0065-13058390 0000000071-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 5150.00	2 Federal Income tax withheld 257.81
b Employer's identification number 80-0438877	a Employee's social security number 651-24-8310		3 Social Security wages 5150.00	4 Social Security tax withheld 319.30
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips 5150.00	6 Medicare tax withheld 74.68
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5150.00	115.00	5150.00	8.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
	X		1 Wages, tips, other compensation	2 Federal Income tax withheld
b Employer's identification number	a Employee's social security number		3 Social Security wages	4 Social Security tax withheld
13 Statutory Employee / Retirement plan / Third-party sick pay			5 Medicare wages and tips	6 Medicare tax withheld
12 See Instrs. for Box 12 / 14 Other		e Employee's name, address, and ZIP code	7 Social Security tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000070-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-47-7126
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SPENCER SHELTON, 18570 E HARVARD DR, AURORA CO 80013	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 9720.00	2 Federal Income tax withheld:
3 Social Security wages: 9720.00	4 Social Security tax withheld: 602.64
5 Medicare wages and tips: 9720.00	6 Medicare tax withheld: 140.94
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9720.00	148.00	9720.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000070-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-47-7126
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SPENCER SHELTON, 18570 E HARVARD DR, AURORA CO 80013	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 9720.00	2 Federal Income tax withheld:
3 Social Security wages: 9720.00	4 Social Security tax withheld: 602.64
5 Medicare wages and tips: 9720.00	6 Medicare tax withheld: 140.94
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9720.00	148.00	9720.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000070-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 524-47-7126
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: SPENCER SHELTON, 18570 E HARVARD DR, AURORA CO 80013	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation: 9720.00	2 Federal Income tax withheld:
3 Social Security wages: 9720.00	4 Social Security tax withheld: 602.64
5 Medicare wages and tips: 9720.00	6 Medicare tax withheld: 140.94
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
Verification Code:	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	9720.00	148.00	9720.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000070-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 524-47-7126				1 Wages, tips, other compensation: 9720.00	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages: 9720.00	4 Social Security tax withheld: 602.64		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: SPENCER SHELTON 18570 E HARVARD DR AURORA CO 80013			5 Medicare wages and tips: 9720.00	6 Medicare tax withheld: 140.94		
					7 Social Security tips:	8 Allocated Tips:		
					10 Dependent care benefits:	11 Nonqualified plans:		
					Verification Code:			
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 9720.00	17 State income tax: 148.00	18 Local wages, tips, etc.: 9720.00	19 Local income tax: 24.00	20 Locality name: CO AUROR		

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:		
					7 Social Security tips:	8 Allocated Tips:		
					10 Dependent care benefits:	11 Nonqualified plans:		
					Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:		

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:		
					7 Social Security tips:	8 Allocated Tips:		
					10 Dependent care benefits:	11 Nonqualified plans:		
					Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:		

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax you owe on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000063-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-55-8220	1 Wages, tips, other compensation: 2190.40	2 Federal Income tax withheld: 139.89
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 2190.40	4 Social Security tax withheld: 135.80
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: ROSHAD SMITH, 4463 STEELE ST, DENVER CO 80216	5 Medicare wages and tips: 2190.40	6 Medicare tax withheld: 31.76
		7 Social Security tips	8 Allocated Tips
		10 Dependent care benefits	11 Nonqualified plans
		Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2190.40	64.00	2190.40	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000063-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-55-8220	1 Wages, tips, other compensation: 2190.40	2 Federal Income tax withheld: 139.89
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 2190.40	4 Social Security tax withheld: 135.80
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: ROSHAD SMITH, 4463 STEELE ST, DENVER CO 80216	5 Medicare wages and tips: 2190.40	6 Medicare tax withheld: 31.76
		7 Social Security tips	8 Allocated Tips
		10 Dependent care benefits	11 Nonqualified plans
		Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2190.40	64.00	2190.40	10.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000063-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239	Department of the Treasury - Internal Revenue Service, OMB No. 1545-0008	
b Employer's identification number: 80-0438877	a Employee's social security number: 523-55-8220	1 Wages, tips, other compensation: 2190.40	2 Federal Income tax withheld: 139.89
13 Statutory Employee / Retirement plan / Third-party sick pay		3 Social Security wages: 2190.40	4 Social Security tax withheld: 135.80
12 See Instrs. for Box 12 / 14 Other	e Employee's name, address, and ZIP code: ROSHAD SMITH, 4463 STEELE ST, DENVER CO 80216	5 Medicare wages and tips: 2190.40	6 Medicare tax withheld: 31.76
		7 Social Security tips	8 Allocated Tips
		10 Dependent care benefits	11 Nonqualified plans
		Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2190.40	64.00	2190.40	10.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000063-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 523-55-8220					1 Wages, tips, other compensation: 2190.40	2 Federal Income tax withheld: 139.89	
13 Statutory Employee / Retirement plan / Third-party sick pay						3 Social Security wages: 2190.40	4 Social Security tax withheld: 135.80	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: ROSHAD SMITH 4463 STEELE ST DENVER CO 80216				5 Medicare wages and tips: 2190.40	6 Medicare tax withheld: 31.76	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
						Verification Code		
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 2190.40	17 State income tax: 64.00	18 Local wages, tips, etc.: 2190.40	19 Local income tax: 10.00	20 Locality name: CO AUROR		

Form W-2 Wage and Tax Statement 2020

d Control number	Void: X	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number					1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay						3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code				5 Medicare wages and tips	6 Medicare tax withheld	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
						Verification Code		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2020

d Control number	Void: X	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number					1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay						3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code				5 Medicare wages and tips	6 Medicare tax withheld	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
						Verification Code		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000022-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 5429.75	2 Federal Income tax withheld:
3 Social Security wages: 5429.75	4 Social Security tax withheld: 336.64
5 Medicare wages and tips: 5429.75	6 Medicare tax withheld: 78.73
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5429.75	122.00	5429.75	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000022-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 5429.75	2 Federal Income tax withheld:
3 Social Security wages: 5429.75	4 Social Security tax withheld: 336.64
5 Medicare wages and tips: 5429.75	6 Medicare tax withheld: 78.73
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5429.75	122.00	5429.75	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000022-0000W2	Void:
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation: 5429.75	2 Federal Income tax withheld:
3 Social Security wages: 5429.75	4 Social Security tax withheld: 336.64
5 Medicare wages and tips: 5429.75	6 Medicare tax withheld: 78.73
7 Social Security tips:	8 Allocated Tips:
10 Dependent care benefits:	11 Nonqualified plans:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5429.75	122.00	5429.75	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000022-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 523-93-4047				1 Wages, tips, other compensation: 5429.75	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages: 5429.75	4 Social Security tax withheld: 336.64		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code: JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010			5 Medicare wages and tips: 5429.75	6 Medicare tax withheld: 78.73		
					7 Social Security tips:	8 Allocated Tips:		
					10 Dependent care benefits:	11 Nonqualified plans:		
					Verification Code:			
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 5429.75	17 State income tax: 122.00	18 Local wages, tips, etc.: 5429.75	19 Local income tax: 24.00	20 Locality name: CO AUROR		

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:		
					7 Social Security tips:	8 Allocated Tips:		
					10 Dependent care benefits:	11 Nonqualified plans:		
					Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:		

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number:	a Employee's social security number:				1 Wages, tips, other compensation:	2 Federal Income tax withheld:		
13 Statutory Employee:	Retirement plan:	Third-party sick pay:			3 Social Security wages:	4 Social Security tax withheld:		
12 See Instrs. for Box 12:	14 Other:	e Employee's name, address, and ZIP code:			5 Medicare wages and tips:	6 Medicare tax withheld:		
					7 Social Security tips:	8 Allocated Tips:		
					10 Dependent care benefits:	11 Nonqualified plans:		
					Verification Code:			
15 State:	Employer's state I.D. No.:	16 State wages, tips, etc.:	17 State income tax:	18 Local wages, tips, etc.:	19 Local income tax:	20 Locality name:		

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000020-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 572-91-2194
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ANGEL VIGIL, 5165 W COLGATE PLACE, DENVER CO 80236	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
12180.00	494.62
3 Social Security wages	**4 Social Security tax withheld**
12180.00	755.16
5 Medicare wages and tips	**6 Medicare tax withheld**
12180.00	176.61
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12180.00	234.00	12180.00	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000020-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 572-91-2194
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ANGEL VIGIL, 5165 W COLGATE PLACE, DENVER CO 80236	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
12180.00	494.62
3 Social Security wages	**4 Social Security tax withheld**
12180.00	755.16
5 Medicare wages and tips	**6 Medicare tax withheld**
12180.00	176.61
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12180.00	234.00	12180.00	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000020-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 572-91-2194
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: ANGEL VIGIL, 5165 W COLGATE PLACE, DENVER CO 80236	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
12180.00	494.62
3 Social Security wages	**4 Social Security tax withheld**
12180.00	755.16
5 Medicare wages and tips	**6 Medicare tax withheld**
12180.00	176.61
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12180.00	234.00	12180.00	14.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000020-0000W2	Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number: 80-0438877	a Employee's social security number: 572-91-2194				1 Wages, tips, other compensation: 12180.00	2 Federal Income tax withheld: 494.62	
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages: 12180.00	4 Social Security tax withheld: 755.16	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: ANGEL VIGIL 5165 W COLGATE PLACE DENVER CO 80236			5 Medicare wages and tips: 12180.00	6 Medicare tax withheld: 176.61	
					7 Social Security tips	8 Allocated Tips	
					10 Dependent care benefits	11 Nonqualified plans	
					Verification Code		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	12180.00	234.00	12180.00	14.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void: X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld	
					7 Social Security tips	8 Allocated Tips	
					10 Dependent care benefits	11 Nonqualified plans	
					Verification Code		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void: X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld	
					7 Social Security tips	8 Allocated Tips	
					10 Dependent care benefits	11 Nonqualified plans	
					Verification Code		

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000038-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-61-7950
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEREK WASHINGTON, 23771 E ALABAMA DR, AURORA CO 80018	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2499.00	170.75
3 Social Security wages	**4 Social Security tax withheld**
2499.00	154.94
5 Medicare wages and tips	**6 Medicare tax withheld**
2499.00	36.24
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2499.00	79.00	2499.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000038-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-61-7950
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEREK WASHINGTON, 23771 E ALABAMA DR, AURORA CO 80018	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2499.00	170.75
3 Social Security wages	**4 Social Security tax withheld**
2499.00	154.94
5 Medicare wages and tips	**6 Medicare tax withheld**
2499.00	36.24
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2499.00	79.00	2499.00	6.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000038-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 523-61-7950
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: DEREK WASHINGTON, 23771 E ALABAMA DR, AURORA CO 80018	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
2499.00	170.75
3 Social Security wages	**4 Social Security tax withheld**
2499.00	154.94
5 Medicare wages and tips	**6 Medicare tax withheld**
2499.00	36.24
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2499.00	79.00	2499.00	6.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000038-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number: 80-0438877	a Employee's social security number: 523-61-7950				1 Wages, tips, other compensation: 2499.00	2 Federal Income tax withheld: 170.75		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages: 2499.00	4 Social Security tax withheld: 154.94		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code: DEREK WASHINGTON 23771 E ALABAMA DR AURORA CO 80018			5 Medicare wages and tips: 2499.00	6 Medicare tax withheld: 36.24		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State: CO	Employer's state I.D. No.: 30941838	16 State wages, tips, etc.: 2499.00	17 State income tax: 79.00	18 Local wages, tips, etc.: 2499.00	19 Local income tax: 6.00	20 Locality name: CO AUROR		

Form W-2 Wage and Tax Statement 2020

d Control number	Void: X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2020

d Control number	Void: X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number	a Employee's social security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Employee / Retirement plan / Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5550.00	
3 Social Security wages	**4 Social Security tax withheld**
5550.00	344.10
5 Medicare wages and tips	**6 Medicare tax withheld**
5550.00	80.48
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5550.00		5550.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5550.00	
3 Social Security wages	**4 Social Security tax withheld**
5550.00	344.10
5 Medicare wages and tips	**6 Medicare tax withheld**
5550.00	80.48
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5550.00		5550.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000009-0000W2 — Void	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: STEPHANIE WILRICH, 2102 MARTIN LUTHER KING BLVD, DENVER CO 80205	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
5550.00	
3 Social Security wages	**4 Social Security tax withheld**
5550.00	344.10
5 Medicare wages and tips	**6 Medicare tax withheld**
5550.00	80.48
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5550.00		5550.00	24.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number: 0065-13058390 0000000009-0000W2	Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number: 80-0438877	a Employee's social security number: 510-76-6414		1 Wages, tips, other compensation: 5550.00 / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: 5550.00 / 4 Social Security tax withheld: 344.10
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code: STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips: 5550.00 / 6 Medicare tax withheld: 80.48
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5550.00		5550.00	24.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number:	Void: X	c Employer's name, address, and ZIP code:	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer's identification number:	a Employee's social security number:		1 Wages, tips, other compensation: / 2 Federal Income tax withheld:
13 Statutory Employee: / Retirement plan: / Third-party sick pay:			3 Social Security wages: / 4 Social Security tax withheld:
12 See Instrs. for Box 12: / 14 Other:		e Employee's name, address, and ZIP code:	5 Medicare wages and tips: / 6 Medicare tax withheld:
			7 Social Security tips: / 8 Allocated Tips:
			10 Dependent care benefits: / 11 Nonqualified plans:
			Verification Code:

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy C, for employee's records

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 this income is taxable and you fail to report it.

d Control number: 0065-13058390 0000000073-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 445-84-0130
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: LATOYA WIMBUSH, 14852 E KENTUCKY DR #926, AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
400.00	
3 Social Security wages	4 Social Security tax withheld
400.00	24.80
5 Medicare wages and tips	6 Medicare tax withheld
400.00	5.80
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	400.00	11.00	400.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy B, to be filed with employee's FEDERAL tax return

d Control number: 0065-13058390 0000000073-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 445-84-0130
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: LATOYA WIMBUSH, 14852 E KENTUCKY DR #926, AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
400.00	
3 Social Security wages	4 Social Security tax withheld
400.00	24.80
5 Medicare wages and tips	6 Medicare tax withheld
400.00	5.80
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	400.00	11.00	400.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for CO

d Control number: 0065-13058390 0000000073-0000W2 — Void:	c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS, 14475 ROBINS DR, DENVER CO 80239
b Employer's identification number: 80-0438877	a Employee's social security number: 445-84-0130
13 Statutory Employee:	Retirement plan:	Third-party sick pay:
12 See Instrs. for Box 12:	14 Other:
e Employee's name, address, and ZIP code: LATOYA WIMBUSH, 14852 E KENTUCKY DR #926, AURORA CO 80012	

Department of the Treasury - Internal Revenue Service
OMB No. 1545-0008

1 Wages, tips, other compensation	2 Federal Income tax withheld
400.00	
3 Social Security wages	4 Social Security tax withheld
400.00	24.80
5 Medicare wages and tips	6 Medicare tax withheld
400.00	5.80
7 Social Security tips	8 Allocated Tips
10 Dependent care benefits	11 Nonqualified plans
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	400.00	11.00	400.00	2.00	CO AUROR

Notice to Employee

Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website *at www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with Code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2020 and more than $8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over $5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is **(a)** reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or **(b)** included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR. .

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

Q—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits,** keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement 2020 — Copy 2, to be filed with employee's tax return for AUROR

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
0065-13058390 0000000073-0000W2		AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
b Employer's identification number: 80-0438877	a Employee's social security number: 445-84-0130		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	
		LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	

1 Wages, tips, other compensation	2 Federal Income tax withheld
400.00	
3 Social Security wages	**4 Social Security tax withheld**
400.00	24.80
5 Medicare wages and tips	**6 Medicare tax withheld**
400.00	5.80
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	400.00	11.00	400.00	2.00	CO AUROR

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2020

d Control number	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
	X		
b Employer's identification number	a Employee's social security number		
13 Statutory Employee / Retirement plan / Third-party sick pay			
12 See Instrs. for Box 12	14 Other	e Employee's name, address, and ZIP code	

1 Wages, tips, other compensation	2 Federal Income tax withheld
3 Social Security wages	**4 Social Security tax withheld**
5 Medicare wages and tips	**6 Medicare tax withheld**
7 Social Security tips	**8 Allocated Tips**
10 Dependent care benefits	**11 Nonqualified plans**
Verification Code	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

33333	a Control number 0065-13058390	For Official Use Only ▶ OMB No. 1545-0008

b Kind of Payer (Check one): 941 [X] · Military [ ] · 943 [ ] · 944 [ ] · CT-1 [ ] · Hshld. emp. [ ] · Medicare govt. emp. [ ]

Kind of Employer (Check one): None apply [ ] · 501c non-govt. [ ] · State/local non-501c [X] · State/local 501c [ ] · Federal govt. [ ]

Third-party sick pay (Check if applicable) [ ]

c Total number of Forms W-2 23	d Establishment number	1 Wages, tips, other compensation 131002.35	2 Federal income tax withheld 5346.21
e Employer identification number (EIN) 80-0438877		3 Social security wages 131002.35	4 Social security tax withheld 8122.14
f Employer's name AGGIES ANGELS CARE PROVIDERS		5 Medicare wages and tips 131002.35	6 Medicare tax withheld 1899.55
14475 ROBINS DR DENVER CO 80239		7 Social security tips	8 Allocated tips
		9	10 Dependent care benefits
g Employer's address and ZIP code		11 Nonqualified plans	12a Deferred compensation
h Other EIN used this year		13 For third-party sick pay use only	12b
15 State Employer's state ID number		14 Income tax withheld by payer of third-party sick pay	
16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
Employer's contact person LATTANY DEJANE		Employer's telephone number (720) 318-0173	For Official Use Only
Employer's fax number		Employer's email address	

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ REFERENCE COPY PREPARED BY PAYCHEX. Title ▶ DO NOT FILE. Date ▶

Form **W-3 Transmittal of Wage and Tax Statements** **2020**

Department of the Treasury
Internal Revenue Service

DO NOT FILE

YOUR FEDERAL W-2 & W-3 DATA IS FILED ELECTRONICALLY

Do Not Staple 6969

Form 1096 (Rev. February 2021) Department of the Treasury Internal Revenue Service	**Annual Summary and Transmittal of U.S. Information Returns**	OMB No. 1545-0108 **2021**

FILER'S name
AGGIES ANGELS CARE PROVIDERS

Street address (including room or suite number)
14475 ROBINS DR

City or town, state or province, country, and ZIP or foreign postal code
DENVER CO 80239

Name of person to contact	Telephone number
LATTANY DEJANE	7203180173
Email address	Fax number

1 Employer identification number	**2** Social security number	**3** Total number of forms	**4** Federal income tax withheld	**5** Total amount reported with this Form 1096
80-0438877		7		9600.00

6 Enter an "X" in only one box below to indicate the type of form being filed.

W-2G 32	1097-BTC 50	1098 81	1098-C 78	1098--E 84	1098--F 03	1098--Q 74	1098---T 83	1099--A 80	1099--B 79	1099--C 85	1099--CAP 73	1099--DIV 91	1099--G 86	1099--INT 92	1099--K 10	1099--LS 16
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

1099-LTC 93	1099-MISC 95	1099-NEC 71	1099-OID 96	1099-PATR 97	1099-Q 31	1099-QA 1A	1099-R 98	1099-S 75	1099--SA 94	1099--SB 43	3921 25	3922 26	5498 28	5498-ESA 72	5498-QA 2A	5498-SA 27
☐	☐	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

REFERENCE COPY PREPARED BY PAYCHEX DO NOT FILE

Signature Title Date

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-87-9194	0065-13058390 - 15 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling $5000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 975.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 975.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	524-02-5323	0065-13058390 - 48 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 1924.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1924.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-95-1873	0065-13058390 - 26 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

TENEA T LATTANY
4699 KITTRIDGE

DENVER CO 80239

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 2925.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 2925.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	449-25-6930	0065-13058390 - 25 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

DEMETRIA D SKIPPER
4155 E IOWA # 103

DENVER CO 80222

COPY C, FOR PAYER

For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling %5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 1656.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1656.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	489-60-6403	0065-13058390 - 72 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling $5000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 1000.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1000.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	510-76-6414	0065-13058390 - 76 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

STEPHANIE WILRICH
2102 MARTIN LUTHER KING BLVD

DENVER CO 80205

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 720.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 720.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	445-84-0130	0065-13058390 - 74 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

LATOYA WIMBUSH
14852 E KENTUCKY DR #926

AURORA CO 80012

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 400.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 400.00

Form **1099 - NEC** **Nonemployee Compensation** ☐ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

COPY C, FOR PAYER
For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

1 Nonemployee Compensation	2 Payer made direct sales totaling %5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Instructions for Recipient

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If you believe you are an employee and cannot get the payer to correct this form, report this amount on the line for "Wages, salaries, tips, etc." of Form 1040, 1040-SR, or 1040-NR. You must also complete Form 8919 and attach it to your return. For more information, see Pub. 1779, Independent Contractor or Employee.

If you are not an employee but the amount in this box is not self-employment (SE) income (for example, it is income from a sporadic activity or a hobby), report this amount on the "Other income" line (on Schedule 1 (Form 1040)).

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows nonemployee compensation. If the amount in this box is SE income, report it on Schedule C or F (Form 1040) if a sole proprietor, or on Form 1065 and Schedule K-1 (Form 1065) if a partnership, and the recipient/partner completes Schedule SE (Form 1040).

Note. If you are receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES (NR)). Individuals must report these amounts as explained in these box 1 instructions. Corporations, fiduciaries, and partnerships must report these amounts on the appropriate line of their tax returns.

Box 2. If checked, consumer products totaling $5,000 or more were sold to you for resale, on a buy-sell, a deposit-commission, or other basis. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 3. Reserved for future use.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Free File. Go to www.irs.gov/FreeFile to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-87-9194	0065-13058390 - 15 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 975.00			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-87-9194	0065-13058390 - 15 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

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$ 975.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 975.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-87-9194	0065-13058390 - 15 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

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	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Instructions for Recipient

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Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

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Box 1. Shows nonemployee compensation. If the amount in this box is SE income, report it on Schedule C or F (Form 1040) if a sole proprietor, or on Form 1065 and Schedule K-1 (Form 1065) if a partnership, and the recipient/partner completes Schedule SE (Form 1040).

Note. If you are receiving payments on which no income, social security, and Medicare taxes are withheld, you should make estimated tax payments. See Form 1040-ES (or Form 1040-ES (NR)). Individuals must report these amounts as explained in these box 1 instructions. Corporations, fiduciaries, and partnerships must report these amounts on the appropriate line of their tax returns.

Box 2. If checked, consumer products totaling $5,000 or more were sold to you for resale, on a buy-sell, a deposit-commission, or other basis. Generally, report any income from your sale of these products on Schedule C (Form 1040).

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Boxes 5–7. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Free File. Go to www.irs.gov/FreeFile to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-87-9194	0065-13058390 - 15 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

ZIPPORAH ARRINGTON

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1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 975.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 975.00

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

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$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

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$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

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Box 3. Reserved for future use.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Boxes 5–7. State income tax withheld reporting boxes.

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	524-02-5323	0065-13058390 - 48 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 1924.00			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	524-02-5323	0065-13058390 - 48 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

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RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

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$ 1924.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1924.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	524-02-5323	0065-13058390 - 48 21365	

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

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RAMONA J COOPER
13795 E 25TH PL

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	524-02-5323	0065-13058390 - 48 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

RAMONA J COOPER
13795 E 25TH PL

AURORA CO 80011

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 1924.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1924.00

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

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$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

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Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-95-1873	0065-13058390 - 26 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

TENEA T LATTANY
4699 KITTRIDGE

DENVER CO 80239

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale	3	4 Federal income tax withheld
$ 2925.00	☐		$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-95-1873	0065-13058390 - 26 21365	

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14475 ROBINS DR

DENVER, CO 80239

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$ 2925.00	☐		$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 2925.00

Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-95-1873	0065-13058390 - 26 21365	

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14475 ROBINS DR

DENVER, CO 80239

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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	522-95-1873	0065-13058390 - 26 21365	

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

TENEA T LATTANY
4699 KITTRIDGE

DENVER CO 80239

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$ 2925.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 2925.00

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

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$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
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$			$
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Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	449-25-6930	0065-13058390 - 25 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

DEMETRIA D SKIPPER
4155 E IOWA # 103

DENVER CO 80222

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1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale	3	4 Federal income tax withheld
$ 1656.00	☐		$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	449-25-6930	0065-13058390 - 25 21365	

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$ 1656.00	☐		$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1656.00

Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	449-25-6930	0065-13058390 - 25 21365	

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

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DEMETRIA D SKIPPER
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$ 1656.00			$
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Form 1099 - NEC **Nonemployee Compensation** X VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
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Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	489-60-6403	0065-13058390 - 72 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

JOYCE WILLIAMS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 1000.00			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **COPY B, FOR RECIPIENT**

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	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 1000.00

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
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14475 ROBINS DR

DENVER, CO 80239

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Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
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Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **COPY B, FOR RECIPIENT**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	510-76-6414	0065-13058390 - 76 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

STEPHANIE WILRICH
2102 MARTIN LUTHER KING BLVD

DENVER CO 80205

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1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale	3	4 Federal income tax withheld
$ 720.00	☐		$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **COPY B, FOR RECIPIENT**

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$ 720.00	☐		$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 720.00

Form 1099 - NEC — **Nonemployee Compensation** — ☐ VOID ☐ CORRECTED — **TO BE FILED WITH FEDERAL INCOME TAX RETURN IF NECESSARY**

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Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

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AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

LATOYA WIMBUSH
14852 E KENTUCKY DR #926

AURORA CO 80012

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Future developments. For the latest information about developments related to Form 1099-NEC and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099NEC.

Free File. Go to www.irs.gov/FreeFile to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

Form 1099 - NEC **Nonemployee Compensation** ☐ VOID ☐ CORRECTED **TO BE FILED WITH STATE INCOME TAX RETURN IF NECESSARY**

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021	80-0438877	445-84-0130	0065-13058390 - 74 21365	

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR

DENVER, CO 80239

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

LATOYA WIMBUSH
14852 E KENTUCKY DR #926

AURORA CO 80012

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$ 400.00			$
	5 State tax withheld $	6 State/Payer's state no. CO/30941838	7 State income $ 400.00

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

Form 1099 - NEC **Nonemployee Compensation** ☒ VOID ☐ CORRECTED

CALENDAR YEAR	PAYER'S TIN	RECIPIENT'S TIN	Account number (see instructions)	
2021				

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

RECIPIENT'S name, street address, city or town, state or province, country, ZIP or foreign postal code

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1 Nonemployee Compensation	2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	3	4 Federal income tax withheld
$			$
	5 State tax withheld $	6 State/Payer's state no.	7 State income $

0065-13058390

Form **940 for 2021:** **Employer's Annual Federal Unemployment (FUTA) Tax Return**
Department of the Treasury - Internal Revenue Service

850113

OMB No. 1545-0028

Employer identification number (EIN): 80-0438877

Name *(not your trade name)*: AGGIES ANGELS CARE PROVIDERS

Trade name *(if any)*:

Address: 14475 ROBINS DR
Number Street | Suite or room number

DENVER | CO | 80239
City | State | ZIP code

Foreign country name | Foreign province/county | Foreign postal code

Type of Return (Check all that apply.)

- ☐ **a.** Amended
- ☐ **b.** Successor employer
- ☐ **c.** No payments to employees in 2021
- ☐ **d.** Final: Business closed or stopped paying wages

Go to *www.irs.gov/form940* for instructions and the latest information.

Read the separate instructions before you complete this form. Please type or print within the boxes.

Part 1: Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1.

1a **If you had to pay state unemployment tax in one state only, enter the state abbreviation** . . . 1a CO
Check Here

1b **If you had to pay state unemployment tax in more than one state, you are a multi-state employer** . . . . . 1b ☐ Complete Schedule A (Form 940).

2 **If you paid wages in a state that is subject to CREDIT REDUCTION** . . . . . 2 ☐ Check here. Complete Schedule A (Form 940).

Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank.

3 **Total payments to all employees** 3 60346.30

4 **Payments exempt from FUTA tax** . . . . . 4 .

Check all that apply: 4a ☐ Fringe benefits; 4b ☐ Group-term life insurance; 4c ☐ Retirement/Pension; 4d ☐ Dependent care; 4e ☐ Other

5 **Total of payments made to each employee in excess of $7,000** 5 6362.50

6 **Subtotal** (line 4 + line 5 = line 6) 6 6362.50

7 **Total taxable FUTA wages** (line 3 - line 6 = line 7). See instructions 7 53983.80

8 **FUTA tax before adjustments** (line 7 x 0.006 = line 8) 8 323.90

Part 3: Determine your adjustments. If any line does NOT apply, leave it blank.

9 **If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054** (line 7 x 0.054 = line 9). Go to line 12 . . . . . 9 .

10 **If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late** (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . . . 10 .

11 **If credit reduction applies,** enter the total from Schedule A (Form 940) . . . . . 11 .

Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank.

12 **Total FUTA tax after adjustments** (lines 8 + 9 + 10 + 11 = line 12) 12 323.90

13 **FUTA tax deposited for the year, including any overpayment applied from a prior year** . . 13 323.90

14 **Balance due** If line 12 is more than line 13, enter the excess on line 14.
- If line 14 is more than $500, you must deposit your tax.
- If line 14 is $500 or less, you may pay with this return. See instructions . . . . . 14 .

15 **Overpayment** If line 13 is more than line 12, enter the excess on line 15 and check a box below . . . . . 15 .

► You **MUST** complete both pages of this form and **SIGN** it. Check one: ☐ Apply to next return. ☐ Send a refund.

Next ➡

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 11234O Form **940** (2021)

850212

Name *(not your trade name)* AGGIES ANGELS CARE PROVIDERS

Employer identification number (EIN) 80-0438877

Part 5: Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.

16 Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.

16a	**1st quarter** (January 1 - March 31)	**16a**
16b	**2nd quarter** (April 1 - June 30)	**16b**
16c	**3rd quarter** (July 1 - September 30)	**16c**
16d	**4th quarter** (October 1 - December 31)	**16d**

17 Total tax liability for the year (lines 16a + 16b + 16c + 16d = line 17) **17** **Total must equal line 12.**

Part 6: May we speak with your third-party designee?

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☐ **Yes.** Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS ☐☐☐☐☐

☐ **No.**

Part 7: Sign here. You MUST complete both pages of this form and SIGN it.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X **Sign your name here**

Print your name here REFERENCE COPY PREPARED

Print your title here BY PAYCHEX. DO NOT FILE

Date

Best daytime phone

Paid preparer use only

Check if you are self-employed ☐

Preparer's name PTIN

Preparer's signature Date / /

Firm's name (or yours if self-employed) EIN

Address Phone ( ) -

City State ZIP code

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE 21365

d Control number 0065-13058390 0000000067 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 509-72-0548
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 2886.00	2 Federal income tax withheld 91.08
3 Social security wages 2886.00	4 Social security tax withheld 178.93
5 Medicare wages and tips 2886.00	6 Medicare tax withheld 41.85
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2886.00	48.00	2886.00	10.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000075 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 331-80-2924
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: AMANDA ARTEAGA 1039 S WALDEN WAY APT 251 AURORA CO 80017	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 1176.00	2 Federal income tax withheld 85.04
3 Social security wages 1176.00	4 Social security tax withheld 72.91
5 Medicare wages and tips 1176.00	6 Medicare tax withheld 17.05
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1176.00	40.00	1176.00	2.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000024 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-86-3393
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 2592.00	2 Federal income tax withheld
3 Social security wages 2592.00	4 Social security tax withheld 160.70
5 Medicare wages and tips 2592.00	6 Medicare tax withheld 37.58
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2592.00		2592.00	10.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000004 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-08-1495
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 3399.80	2 Federal income tax withheld
3 Social security wages 3399.80	4 Social security tax withheld 210.79
5 Medicare wages and tips 3399.80	6 Medicare tax withheld 49.30
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3399.80	35.00	3399.80	14.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE 21365

Field	Value
d Control number	0065-13058390 0000000077 - 0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer identification number (EIN)	80-0438877
a Employee's social security number	524-02-5323
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	
14 Other	
e Employee's name, address, and ZIP code	RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011
1 Wages, tips, other compensation	1300.00
2 Federal income tax withheld	25.42
3 Social security wages	1300.00
4 Social security tax withheld	80.60
5 Medicare wages and tips	1300.00
6 Medicare tax withheld	18.85
7 Social Security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1300.00	44.00	1300.00	4.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

Field	Value
d Control number	0065-13058390 0000000068 - 0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer identification number (EIN)	80-0438877
a Employee's social security number	523-83-4294
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	
14 Other	
e Employee's name, address, and ZIP code	NALITLI EDMOND 5579 WINDERMERE ST LITTLETON CO 80120
1 Wages, tips, other compensation	80.00
2 Federal income tax withheld	
3 Social security wages	80.00
4 Social security tax withheld	4.96
5 Medicare wages and tips	80.00
6 Medicare tax withheld	1.16
7 Social Security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	80.00		80.00		CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

Field	Value
d Control number	0065-13058390 0000000006 - 0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer identification number (EIN)	80-0438877
a Employee's social security number	524-87-3130
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	
14 Other	
e Employee's name, address, and ZIP code	MIRNA FLORES
1 Wages, tips, other compensation	4320.00
2 Federal income tax withheld	19.44
3 Social security wages	4320.00
4 Social security tax withheld	267.84
5 Medicare wages and tips	4320.00
6 Medicare tax withheld	62.64
7 Social Security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4320.00	12.00	4320.00	14.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

Field	Value
d Control number	0065-13058390 0000000019 - 0000W2
Void	
c Employer's name, address, and ZIP code	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239
Department of the Treasury - Internal Revenue Service	OMB No. 1545-0008
b Employer identification number (EIN)	80-0438877
a Employee's social security number	524-13-8337
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	
14 Other	
e Employee's name, address, and ZIP code	DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239
1 Wages, tips, other compensation	3108.00
2 Federal income tax withheld	195.58
3 Social security wages	3108.00
4 Social security tax withheld	192.70
5 Medicare wages and tips	3108.00
6 Medicare tax withheld	45.07
7 Social Security tips	
8 Allocated tips	
10 Dependent care benefits	
11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3108.00	91.00	3108.00	14.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE 21365

d Control number 0065-13058390 0000000055 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 521-19-2891
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: WILLIAM HAYES 10000 E ALAMEDA AVE #816 DENVER CO 80247	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 3936.00	2 Federal income tax withheld 334.82
3 Social security wages 3936.00	4 Social security tax withheld 244.03
5 Medicare wages and tips 3936.00	6 Medicare tax withheld 57.07
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3936.00	144.00	3936.00	6.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000007 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-77-9492
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 2200.00	2 Federal income tax withheld 192.96
3 Social security wages 2200.00	4 Social security tax withheld 136.40
5 Medicare wages and tips 2200.00	6 Medicare tax withheld 31.90
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2200.00	77.00	2200.00	2.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000014 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-95-1873
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 1222.00	2 Federal income tax withheld 7.79
3 Social security wages 1222.00	4 Social security tax withheld 75.76
5 Medicare wages and tips 1222.00	6 Medicare tax withheld 17.72
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1222.00	4.00	1222.00	4.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000021 - 0000W2	Void
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-88-9226
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal	
12 See instructions for box 12	14 Other
c Employer's name, address, and ZIP code: AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	
e Employee's name, address, and ZIP code: THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	
Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
1 Wages, tips, other compensation 5268.00	2 Federal income tax withheld 356.24
3 Social security wages 5268.00	4 Social security tax withheld 326.62
5 Medicare wages and tips 5268.00	6 Medicare tax withheld 76.39
7 Social Security tips	8 Allocated tips
10 Dependent care benefits	11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5268.00	162.00	5268.00	14.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE 21365

d Control number 0065-13058390 0000000046 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 653-14-0029	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 488.00	2 Federal income tax withheld 15.88	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 488.00	4 Social security tax withheld 30.26	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	5 Medicare wages and tips 488.00	6 Medicare tax withheld 7.08	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	488.00	8.00	488.00		CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000052 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-47-0739	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 1872.00	2 Federal income tax withheld 105.42	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 1872.00	4 Social security tax withheld 116.06	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	5 Medicare wages and tips 1872.00	6 Medicare tax withheld 27.14	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	48.00	1872.00	6.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000071 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 651-24-8310	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 13362.50	2 Federal income tax withheld 1058.56	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 13362.50	4 Social security tax withheld 828.48	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223	5 Medicare wages and tips 13362.50	6 Medicare tax withheld 193.76	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13362.50	439.00	13362.50	12.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000070 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-47-7126	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 648.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 648.00	4 Social security tax withheld 40.18	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SPENCER SHELTON 18570 E HARVARD DR AURORA CO 80013	5 Medicare wages and tips 648.00	6 Medicare tax withheld 9.40	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	648.00	15.00	648.00	2.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE 21365

d Control number 0065-13058390 0000000069 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 449-25-6930	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 4392.00	2 Federal income tax withheld 194.52	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 4392.00	4 Social security tax withheld 272.30	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEMETRIA D SKIPPER 942 S DEANLOAN WAY #5 AURORA CO 80012	5 Medicare wages and tips 4392.00	6 Medicare tax withheld 63.68	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4392.00	144.00	4392.00	10.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000022 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-93-4047	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 3774.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 3774.00	4 Social security tax withheld 233.99	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips 3774.00	6 Medicare tax withheld 54.72	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	112.00	3774.00	14.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000058 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 489-60-6403	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 480.00	2 Federal income tax withheld 31.54	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 480.00	4 Social security tax withheld 29.76	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JOYCE WILLIAMS	5 Medicare wages and tips 480.00	6 Medicare tax withheld 6.96	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	15.00	480.00	2.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390 0000000009 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) 80-0438877	a Employee's social security number 510-76-6414	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 3792.00	2 Federal income tax withheld	
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 3792.00	4 Social security tax withheld 235.10	
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 3792.00	6 Medicare tax withheld 54.98	
			7 Social Security tips	8 Allocated tips	
			10 Dependent care benefits	11 Nonqualified plans	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3792.00		3792.00	14.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE 21365

d Control number 0065-13058390 0000000073 - 0000W2	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 445-84-0130	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 50.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages 50.00 / 4 Social security tax withheld 3.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips 50.00 / 6 Medicare tax withheld 0.73
		LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	7 Social Security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	50.00		50.00		CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390	Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation 60346.30 / 2 Federal income tax withheld 2714.29
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal X			3 Social security wages 60346.30 / 4 Social security tax withheld 3741.47
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips 60346.30 / 6 Medicare tax withheld 875.03
			7 Social Security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	60346.30	1438.00	60346.30	154.00	CO AUROR

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390	Void X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages / 4 Social security tax withheld
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage andTax Statement 2021

EMPLOYER REFERENCE COPY - DO NOT FILE

d Control number 0065-13058390	Void X	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number	AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	1 Wages, tips, other compensation / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay / Subtotal			3 Social security wages / 4 Social security tax withheld
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code	5 Medicare wages and tips / 6 Medicare tax withheld
			7 Social Security tips / 8 Allocated tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

SHIRLY ANDERSON
12565 ALBROOK DR #3701
DENVER CO 80239

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000067 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 509-72-0548		1 Wages, tips, other compensation: 2886.00 2 Federal income tax withheld: 91.08
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 2886.00 4 Social security tax withheld: 178.93
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	5 Medicare wages and tips: 2886.00 6 Medicare tax withheld: 41.85 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2886.00	48.00	2886.00	10.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000067 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 509-72-0548		1 Wages, tips, other compensation: 2886.00 2 Federal income tax withheld: 91.08
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 2886.00 4 Social security tax withheld: 178.93
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	5 Medicare wages and tips: 2886.00 6 Medicare tax withheld: 41.85 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2886.00	48.00	2886.00	10.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000067 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 509-72-0548		1 Wages, tips, other compensation: 2886.00 2 Federal income tax withheld: 91.08
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 2886.00 4 Social security tax withheld: 178.93
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	5 Medicare wages and tips: 2886.00 6 Medicare tax withheld: 41.85 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2886.00	48.00	2886.00	10.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000067 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 509-72-0548		1 Wages, tips, other compensation: 2886.00 2 Federal income tax withheld: 91.08
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 2886.00 4 Social security tax withheld: 178.93
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SHIRLY ANDERSON 12565 ALBROOK DR #3701 DENVER CO 80239	5 Medicare wages and tips: 2886.00 6 Medicare tax withheld: 41.85 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2886.00	48.00	2886.00	10.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

AMANDA ARTEAGA
1039 S WALDEN WAY APT 251
AURORA CO 80017

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000075 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 331-80-2924		1 Wages, tips, other compensation: 1176.00 2 Federal income tax withheld: 85.04
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1176.00 4 Social security tax withheld: 72.91
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code AMANDA ARTEAGA 1039 S WALDEN WAY APT 251 AURORA CO 80017	5 Medicare wages and tips: 1176.00 6 Medicare tax withheld: 17.05 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1176.00	40.00	1176.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000075 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 331-80-2924		1 Wages, tips, other compensation: 1176.00 2 Federal income tax withheld: 85.04
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1176.00 4 Social security tax withheld: 72.91
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code AMANDA ARTEAGA 1039 S WALDEN WAY APT 251 AURORA CO 80017	5 Medicare wages and tips: 1176.00 6 Medicare tax withheld: 17.05 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1176.00	40.00	1176.00	2.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000075 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 331-80-2924		1 Wages, tips, other compensation: 1176.00 2 Federal income tax withheld: 85.04
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1176.00 4 Social security tax withheld: 72.91
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code AMANDA ARTEAGA 1039 S WALDEN WAY APT 251 AURORA CO 80017	5 Medicare wages and tips: 1176.00 6 Medicare tax withheld: 17.05 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1176.00	40.00	1176.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000075 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 331-80-2924		1 Wages, tips, other compensation: 1176.00 2 Federal income tax withheld: 85.04
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1176.00 4 Social security tax withheld: 72.91
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code AMANDA ARTEAGA 1039 S WALDEN WAY APT 251 AURORA CO 80017	5 Medicare wages and tips: 1176.00 6 Medicare tax withheld: 17.05 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

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CO	30941838	1176.00	40.00	1176.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

SHAONDALYN L COLEY
5095 EAGLE STREET
DENVER CO 80239

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000004 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-08-1495		1 Wages, tips, other compensation 3399.80 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 3399.80 / 4 Social security tax withheld 210.79
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SHAONDALYN L COLEY 5095 EAGLE STREET DENVER CO 80239	5 Medicare wages and tips 3399.80 / 6 Medicare tax withheld 49.30 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3399.80	35.00	3399.80	14.00	CO AUROR

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Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

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Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

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Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

RAMONA J COOPER
13795 E 25TH PL
AURORA CO 80011

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000077 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-02-5323		1 Wages, tips, other compensation: 1300.00 / 2 Federal income tax withheld: 25.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1300.00 / 4 Social security tax withheld: 80.60
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	5 Medicare wages and tips: 1300.00 / 6 Medicare tax withheld: 18.85 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1300.00	44.00	1300.00	4.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000077 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-02-5323		1 Wages, tips, other compensation: 1300.00 / 2 Federal income tax withheld: 25.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1300.00 / 4 Social security tax withheld: 80.60
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	5 Medicare wages and tips: 1300.00 / 6 Medicare tax withheld: 18.85 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1300.00	44.00	1300.00	4.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000077 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-02-5323		1 Wages, tips, other compensation: 1300.00 / 2 Federal income tax withheld: 25.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1300.00 / 4 Social security tax withheld: 80.60
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	5 Medicare wages and tips: 1300.00 / 6 Medicare tax withheld: 18.85 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1300.00	44.00	1300.00	4.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000077 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-02-5323		1 Wages, tips, other compensation: 1300.00 / 2 Federal income tax withheld: 25.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1300.00 / 4 Social security tax withheld: 80.60
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code RAMONA J COOPER 13795 E 25TH PL AURORA CO 80011	5 Medicare wages and tips: 1300.00 / 6 Medicare tax withheld: 18.85 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1300.00	44.00	1300.00	4.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

NALITLI EDMOND
5579 WINDERMERE ST
LITTLETON CO 80120

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000068 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-83-4294		1 Wages, tips, other compensation: 80.00 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 80.00 4 Social security tax withheld: 4.96
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code NALITLI EDMOND 5579 WINDERMERE ST LITTLETON CO 80120	5 Medicare wages and tips: 80.00 6 Medicare tax withheld: 1.16 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	80.00		80.00		CO AUROR

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Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000068 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-83-4294		1 Wages, tips, other compensation: 80.00 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 80.00 4 Social security tax withheld: 4.96
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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

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13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 80.00 4 Social security tax withheld: 4.96
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Form W-2 Wage and Tax Statement 2021

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b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-83-4294		1 Wages, tips, other compensation: 80.00 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 80.00 4 Social security tax withheld: 4.96
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code NALITLI EDMOND 5579 WINDERMERE ST LITTLETON CO 80120	5 Medicare wages and tips: 80.00 6 Medicare tax withheld: 1.16 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

DOMINGO RUIZ
116 S ZUNI ST
DENVER CO 80223

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000071 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 651-24-8310		1 Wages, tips, other compensation 13362.50 / 2 Federal income tax withheld 1058.56
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 13362.50 / 4 Social security tax withheld 828.48
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223	5 Medicare wages and tips 13362.50 / 6 Medicare tax withheld 193.76 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13362.50	439.00	13362.50	12.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000071 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
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12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223	5 Medicare wages and tips 13362.50 / 6 Medicare tax withheld 193.76 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000071 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 651-24-8310		1 Wages, tips, other compensation 13362.50 / 2 Federal income tax withheld 1058.56
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 13362.50 / 4 Social security tax withheld 828.48
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223	5 Medicare wages and tips 13362.50 / 6 Medicare tax withheld 193.76 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

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CO	30941838	13362.50	439.00	13362.50	12.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000071 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 651-24-8310		1 Wages, tips, other compensation 13362.50 / 2 Federal income tax withheld 1058.56
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 13362.50 / 4 Social security tax withheld 828.48
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DOMINGO RUIZ 116 S ZUNI ST DENVER CO 80223	5 Medicare wages and tips 13362.50 / 6 Medicare tax withheld 193.76 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	13362.50	439.00	13362.50	12.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

DEMETRIA D SKIPPER
942 S DEANLOAN WAY #5
AURORA CO 80012

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000069 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 449-25-6930		1 Wages, tips, other compensation 4392.00
			2 Federal income tax withheld 194.52
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 4392.00
			4 Social security tax withheld 272.30
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEMETRIA D SKIPPER 942 S DEANLOAN WAY #5 AURORA CO 80012	5 Medicare wages and tips 4392.00
			6 Medicare tax withheld 63.68
			7 Social Security Tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4392.00	144.00	4392.00	10.00	CO AUROR

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Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000069 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 449-25-6930		1 Wages, tips, other compensation 4392.00
			2 Federal income tax withheld 194.52
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			4 Social security tax withheld 272.30
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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

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b Employer identification number (EIN) 80-0438877	a Employee's social security number 449-25-6930		1 Wages, tips, other compensation 4392.00
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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

JASMINE VALDEZ
2342 MOLINE STREET
AURORA CO 80010

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000022 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-93-4047		1 Wages, tips, other compensation: 3774.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3774.00 / 4 Social security tax withheld: 233.99
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips: 3774.00 / 6 Medicare tax withheld: 54.72 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	112.00	3774.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000022 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-93-4047		1 Wages, tips, other compensation: 3774.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3774.00 / 4 Social security tax withheld: 233.99
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips: 3774.00 / 6 Medicare tax withheld: 54.72 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	112.00	3774.00	14.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000022 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-93-4047		1 Wages, tips, other compensation: 3774.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3774.00 / 4 Social security tax withheld: 233.99
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips: 3774.00 / 6 Medicare tax withheld: 54.72 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	112.00	3774.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000022 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-93-4047		1 Wages, tips, other compensation: 3774.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3774.00 / 4 Social security tax withheld: 233.99
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JASMINE VALDEZ 2342 MOLINE STREET AURORA CO 80010	5 Medicare wages and tips: 3774.00 / 6 Medicare tax withheld: 54.72 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3774.00	112.00	3774.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

STEPHANIE WILRICH
2102 MARTIN LUTHER KING BLVD
DENVER CO 80205

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000009 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 510-76-6414		1 Wages, tips, other compensation 3792.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 3792.00 / 4 Social security tax withheld 235.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 3792.00 / 6 Medicare tax withheld 54.98 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3792.00		3792.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000009 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 510-76-6414		1 Wages, tips, other compensation 3792.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 3792.00 / 4 Social security tax withheld 235.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 3792.00 / 6 Medicare tax withheld 54.98 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000009 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 510-76-6414		1 Wages, tips, other compensation 3792.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 3792.00 / 4 Social security tax withheld 235.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 3792.00 / 6 Medicare tax withheld 54.98 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3792.00		3792.00	14.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000009 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 510-76-6414		1 Wages, tips, other compensation 3792.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 3792.00 / 4 Social security tax withheld 235.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code STEPHANIE WILRICH 2102 MARTIN LUTHER KING BLVD DENVER CO 80205	5 Medicare wages and tips 3792.00 / 6 Medicare tax withheld 54.98 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Notice to Employee

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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

LATOYA WIMBUSH
14852 E KENTUCKY DR #926
AURORA CO 80012

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000073 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 445-84-0130		1 Wages, tips, other compensation: 50.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 50.00 / 4 Social security tax withheld: 3.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	5 Medicare wages and tips: 50.00 / 6 Medicare tax withheld: 0.73 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	50.00		50.00		CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000073 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 445-84-0130		1 Wages, tips, other compensation: 50.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 50.00 / 4 Social security tax withheld: 3.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	5 Medicare wages and tips: 50.00 / 6 Medicare tax withheld: 0.73 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	50.00		50.00		CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000073 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 445-84-0130		1 Wages, tips, other compensation: 50.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 50.00 / 4 Social security tax withheld: 3.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	5 Medicare wages and tips: 50.00 / 6 Medicare tax withheld: 0.73 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	50.00		50.00		CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000073 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 445-84-0130		1 Wages, tips, other compensation: 50.00 / 2 Federal income tax withheld:
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 50.00 / 4 Social security tax withheld: 3.10
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code LATOYA WIMBUSH 14852 E KENTUCKY DR #926 AURORA CO 80012	5 Medicare wages and tips: 50.00 / 6 Medicare tax withheld: 0.73 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	50.00		50.00		CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

CALVIN COLEY
1769 HANOVER ST
AURORA CO 80010

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000024 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-86-3393		1 Wages, tips, other compensation 2592.00
13 Statutory employee / Retirement plan / Third-party sick pay			2 Federal income tax withheld
			3 Social security wages 2592.00
			4 Social security tax withheld 160.70
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code CALVIN COLEY 1769 HANOVER ST AURORA CO 80010	5 Medicare wages and tips 2592.00
			6 Medicare tax withheld 37.58
			7 Social Security Tips
			8 Allocated Tips
			10 Dependent care benefits
			11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2592.00		2592.00	10.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

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b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-86-3393		1 Wages, tips, other compensation 2592.00
13 Statutory employee / Retirement plan / Third-party sick pay			2 Federal income tax withheld
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CO	30941838	2592.00		2592.00	10.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000024 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-86-3393		1 Wages, tips, other compensation 2592.00
13 Statutory employee / Retirement plan / Third-party sick pay			2 Federal income tax withheld
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			6 Medicare tax withheld 37.58
			7 Social Security Tips
			8 Allocated Tips
			10 Dependent care benefits
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CO	30941838	2592.00		2592.00	10.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000024 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-86-3393		1 Wages, tips, other compensation 2592.00
13 Statutory employee / Retirement plan / Third-party sick pay			2 Federal income tax withheld
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CO	30941838	2592.00		2592.00	10.00	CO AUROR

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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

MIRNA FLORES

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000006 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-87-3130		1 Wages, tips, other compensation: 4320.00 / 2 Federal income tax withheld: 19.44
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 4320.00 / 4 Social security tax withheld: 267.84
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code MIRNA FLORES	5 Medicare wages and tips: 4320.00 / 6 Medicare tax withheld: 62.64
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4320.00	12.00	4320.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000006 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-87-3130		1 Wages, tips, other compensation: 4320.00 / 2 Federal income tax withheld: 19.44
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 4320.00 / 4 Social security tax withheld: 267.84
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code MIRNA FLORES	5 Medicare wages and tips: 4320.00 / 6 Medicare tax withheld: 62.64
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4320.00	12.00	4320.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000006 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-87-3130		1 Wages, tips, other compensation: 4320.00 / 2 Federal income tax withheld: 19.44
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 4320.00 / 4 Social security tax withheld: 267.84
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code MIRNA FLORES	5 Medicare wages and tips: 4320.00 / 6 Medicare tax withheld: 62.64
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4320.00	12.00	4320.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000006 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-87-3130		1 Wages, tips, other compensation: 4320.00 / 2 Federal income tax withheld: 19.44
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 4320.00 / 4 Social security tax withheld: 267.84
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code MIRNA FLORES	5 Medicare wages and tips: 4320.00 / 6 Medicare tax withheld: 62.64
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	4320.00	12.00	4320.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

DEWANDA GRAHAM
4617 FREEPORT WAY
DENVER CO 80239

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000019 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-13-8337		1 Wages, tips, other compensation: 3108.00 2 Federal income tax withheld: 195.58
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3108.00 4 Social security tax withheld: 192.70
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips: 3108.00 6 Medicare tax withheld: 45.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3108.00	91.00	3108.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000019 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-13-8337		1 Wages, tips, other compensation: 3108.00 2 Federal income tax withheld: 195.58
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3108.00 4 Social security tax withheld: 192.70
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips: 3108.00 6 Medicare tax withheld: 45.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3108.00	91.00	3108.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000019 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-13-8337		1 Wages, tips, other compensation: 3108.00 2 Federal income tax withheld: 195.58
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3108.00 4 Social security tax withheld: 192.70
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips: 3108.00 6 Medicare tax withheld: 45.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3108.00	91.00	3108.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000019 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-13-8337		1 Wages, tips, other compensation: 3108.00 2 Federal income tax withheld: 195.58
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3108.00 4 Social security tax withheld: 192.70
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEWANDA GRAHAM 4617 FREEPORT WAY DENVER CO 80239	5 Medicare wages and tips: 3108.00 6 Medicare tax withheld: 45.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3108.00	91.00	3108.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

WILLIAM HAYES
10000 E ALAMEDA AVE #816
DENVER CO 80247

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000055 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 521-19-2891		1 Wages, tips, other compensation: 3936.00 2 Federal income tax withheld: 334.82
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3936.00 4 Social security tax withheld: 244.03
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code WILLIAM HAYES 10000 E ALAMEDA AVE #816 DENVER CO 80247	5 Medicare wages and tips: 3936.00 6 Medicare tax withheld: 57.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3936.00	144.00	3936.00	6.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000055 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 521-19-2891		1 Wages, tips, other compensation: 3936.00 2 Federal income tax withheld: 334.82
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3936.00 4 Social security tax withheld: 244.03
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code WILLIAM HAYES 10000 E ALAMEDA AVE #816 DENVER CO 80247	5 Medicare wages and tips: 3936.00 6 Medicare tax withheld: 57.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3936.00	144.00	3936.00	6.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000055 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 521-19-2891		1 Wages, tips, other compensation: 3936.00 2 Federal income tax withheld: 334.82
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3936.00 4 Social security tax withheld: 244.03
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code WILLIAM HAYES 10000 E ALAMEDA AVE #816 DENVER CO 80247	5 Medicare wages and tips: 3936.00 6 Medicare tax withheld: 57.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3936.00	144.00	3936.00	6.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000055 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 521-19-2891		1 Wages, tips, other compensation: 3936.00 2 Federal income tax withheld: 334.82
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 3936.00 4 Social security tax withheld: 244.03
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code WILLIAM HAYES 10000 E ALAMEDA AVE #816 DENVER CO 80247	5 Medicare wages and tips: 3936.00 6 Medicare tax withheld: 57.07 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	3936.00	144.00	3936.00	6.00	CO AUROR

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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

DEJANE LATTANY
14475 ROBINS DR
DENVER CO 80239

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000007 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-77-9492		1 Wages, tips, other compensation: 2200.00 2 Federal income tax withheld: 192.96
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 2200.00 4 Social security tax withheld: 136.40
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	5 Medicare wages and tips: 2200.00 6 Medicare tax withheld: 31.90 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2200.00	77.00	2200.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000007 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 523-77-9492		1 Wages, tips, other compensation: 2200.00 2 Federal income tax withheld: 192.96
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 2200.00 4 Social security tax withheld: 136.40
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code DEJANE LATTANY 14475 ROBINS DR DENVER CO 80239	5 Medicare wages and tips: 2200.00 6 Medicare tax withheld: 31.90 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	2200.00	77.00	2200.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy 2, to be filed with employee's tax return for CO

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000007 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
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CO	30941838	2200.00	77.00	2200.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

TENEA T LATTANY
4645 E 5TH AVE
DENVER CO 80230

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000014 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-95-1873		1 Wages, tips, other compensation: 1222.00 2 Federal income tax withheld: 7.79
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1222.00 4 Social security tax withheld: 75.76
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code TENEA T LATTANY 4645 E 5TH AVE DENVER CO 80230	5 Medicare wages and tips: 1222.00 6 Medicare tax withheld: 17.72 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1222.00	4.00	1222.00	4.00	CO AUROR

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Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

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Form W-2 Wage and Tax Statement 2021

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Form W-2 Wage and Tax Statement 2021

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Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

THERESA LOVATO
3051 S GOLDEN WAY
DENVER CO 80226

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000021 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-88-9226		1 Wages, tips, other compensation: 5268.00 / 2 Federal income tax withheld: 356.24
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 5268.00 / 4 Social security tax withheld: 326.62
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	5 Medicare wages and tips: 5268.00 / 6 Medicare tax withheld: 76.39 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5268.00	162.00	5268.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000021 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-88-9226		1 Wages, tips, other compensation: 5268.00 / 2 Federal income tax withheld: 356.24
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 5268.00 / 4 Social security tax withheld: 326.62
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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000021 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-88-9226		1 Wages, tips, other compensation: 5268.00 / 2 Federal income tax withheld: 356.24
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12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code THERESA LOVATO 3051 S GOLDEN WAY DENVER CO 80226	5 Medicare wages and tips: 5268.00 / 6 Medicare tax withheld: 76.39 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	5268.00	162.00	5268.00	14.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000021 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-88-9226		1 Wages, tips, other compensation: 5268.00 / 2 Federal income tax withheld: 356.24
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CO	30941838	5268.00	162.00	5268.00	14.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

ALYSSIA MARTINEZ
3051 S GOLDEN WAY
DENVER CO 80227

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000046 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 653-14-0029		1 Wages, tips, other compensation: 488.00 2 Federal income tax withheld: 15.88
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 488.00 4 Social security tax withheld: 30.26
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ALYSSIA MARTINEZ 3051 S GOLDEN WAY DENVER CO 80227	5 Medicare wages and tips: 488.00 6 Medicare tax withheld: 7.08 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	488.00	8.00	488.00		CO AUROR

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Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

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b Employer identification number (EIN) 80-0438877	a Employee's social security number 653-14-0029		1 Wages, tips, other compensation: 488.00 2 Federal income tax withheld: 15.88
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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

ADAM R ROMERO
35 S LOGAN ST APT 402
DENVER CO 80219

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000052 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-47-0739		1 Wages, tips, other compensation: 1872.00 2 Federal income tax withheld: 105.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1872.00 4 Social security tax withheld: 116.06
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	5 Medicare wages and tips: 1872.00 6 Medicare tax withheld: 27.14 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	48.00	1872.00	6.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000052 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-47-0739		1 Wages, tips, other compensation: 1872.00 2 Federal income tax withheld: 105.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1872.00 4 Social security tax withheld: 116.06
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	5 Medicare wages and tips: 1872.00 6 Medicare tax withheld: 27.14 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000052 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-47-0739		1 Wages, tips, other compensation: 1872.00 2 Federal income tax withheld: 105.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1872.00 4 Social security tax withheld: 116.06
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	5 Medicare wages and tips: 1872.00 6 Medicare tax withheld: 27.14 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	48.00	1872.00	6.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000052 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 522-47-0739		1 Wages, tips, other compensation: 1872.00 2 Federal income tax withheld: 105.42
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 1872.00 4 Social security tax withheld: 116.06
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code ADAM R ROMERO 35 S LOGAN ST APT 402 DENVER CO 80219	5 Medicare wages and tips: 1872.00 6 Medicare tax withheld: 27.14 7 Social Security Tips 8 Allocated Tips 10 Dependent care benefits 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	1872.00	48.00	1872.00	6.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

SPENCER SHELTON
18570 E HARVARD DR
AURORA CO 80013

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000070 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-47-7126		1 Wages, tips, other compensation 648.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 648.00 / 4 Social security tax withheld 40.18
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SPENCER SHELTON 18570 E HARVARD DR AURORA CO 80013	5 Medicare wages and tips 648.00 / 6 Medicare tax withheld 9.40 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	648.00	15.00	648.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000070 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-47-7126		1 Wages, tips, other compensation 648.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 648.00 / 4 Social security tax withheld 40.18
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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000070 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-47-7126		1 Wages, tips, other compensation 648.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 648.00 / 4 Social security tax withheld 40.18
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SPENCER SHELTON 18570 E HARVARD DR AURORA CO 80013	5 Medicare wages and tips 648.00 / 6 Medicare tax withheld 9.40 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000070 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 524-47-7126		1 Wages, tips, other compensation 648.00 / 2 Federal income tax withheld
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages 648.00 / 4 Social security tax withheld 40.18
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code SPENCER SHELTON 18570 E HARVARD DR AURORA CO 80013	5 Medicare wages and tips 648.00 / 6 Medicare tax withheld 9.40 7 Social Security Tips / 8 Allocated Tips 10 Dependent care benefits / 11 Nonqualified plans

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Notice to Employee

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Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $19,500 ($13,500 if you only have SIMPLE plans; $22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $19,500. Deferrals under code H are limited to $7,000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

AGGIES ANGELS CARE PROVIDERS
14475 ROBINS DR
DENVER CO 80239

JOYCE WILLIAMS

Copy C, for employee's records

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000058 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 489-60-6403		1 Wages, tips, other compensation: 480.00 / 2 Federal income tax withheld: 31.54
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 480.00 / 4 Social security tax withheld: 29.76
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JOYCE WILLIAMS	5 Medicare wages and tips: 480.00 / 6 Medicare tax withheld: 6.96
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	15.00	480.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Copy B, to be filed with employee's FEDERAL tax return

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000058 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 489-60-6403		1 Wages, tips, other compensation: 480.00 / 2 Federal income tax withheld: 31.54
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 480.00 / 4 Social security tax withheld: 29.76
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JOYCE WILLIAMS	5 Medicare wages and tips: 480.00 / 6 Medicare tax withheld: 6.96
			7 Social Security Tips / 8 Allocated Tips
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15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	15.00	480.00	2.00	CO AUROR

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Copy 2, to be filed with employee's tax return for CO

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000058 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 489-60-6403		1 Wages, tips, other compensation: 480.00 / 2 Federal income tax withheld: 31.54
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 480.00 / 4 Social security tax withheld: 29.76
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JOYCE WILLIAMS	5 Medicare wages and tips: 480.00 / 6 Medicare tax withheld: 6.96
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	30941838	480.00	15.00	480.00	2.00	CO AUROR

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Copy 2, to be filed with employee's tax return for AUROR

Form W-2 Wage and Tax Statement 2021

d Control number 0065-13058390 0000000058 - 0000W2	Void	c Employer's name, address, and ZIP code AGGIES ANGELS CARE PROVIDERS 14475 ROBINS DR DENVER CO 80239	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008
b Employer identification number (EIN) 80-0438877	a Employee's social security number 489-60-6403		1 Wages, tips, other compensation: 480.00 / 2 Federal income tax withheld: 31.54
13 Statutory employee / Retirement plan / Third-party sick pay			3 Social security wages: 480.00 / 4 Social security tax withheld: 29.76
12 See instructions for box 12	14 Other	e Employee's name, address, and ZIP code JOYCE WILLIAMS	5 Medicare wages and tips: 480.00 / 6 Medicare tax withheld: 6.96
			7 Social Security Tips / 8 Allocated Tips
			10 Dependent care benefits / 11 Nonqualified plans

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CO	30941838	480.00	15.00	480.00	2.00	CO AUROR

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 this income is taxable and you fail to report it.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit *www.irs.gov/EITC.* See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2021 and more than $8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than $5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

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However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a taxexempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

33333	a Control number 0065-13058390	For Official Use Only ▶ OMB No. 1545-0008

b **Kind of Payer** (Check one): 941 [X] | Military [ ] | 943 [ ] | 944 [ ] | CT-1 [ ] | Hshld. emp. [ ] | Medicare govt. emp. [ ]

Kind of Employer (Check one): None apply [X] | 501c non-govt. [ ] | State/local non-501c [ ] | State/local 501c [ ] | Federal govt. [ ] | Third-party sick pay (Check if applicable) [ ]

c Total number of Forms W-2: 21	d Establishment number:
e Employer identification number (EIN): 80-0438877	
f Employer's name: AGGIES ANGELS CARE PROVIDERS	
14475 ROBINS DR DENVER CO 80239 g Employer's address and ZIP code	
h Other EIN used this year	
15 State: Employer's state ID number:	
16 State wages, tips, etc.	17 State income tax
Employer's contact person: LATTANY DEJANE	
Employer's fax number:	

1 Wages, tips, other compensation: 60346.30	2 Federal income tax withheld: 2714.29
3 Social security wages: 60346.30	4 Social security tax withheld: 3741.47
5 Medicare wages and tips: 60346.30	6 Medicare tax withheld: 875.03
7 Social security tips:	8 Allocated tips:
9:	10 Dependent care benefits:
11 Nonqualified plans:	12a Deferred compensation:
13 For third-party sick pay use only:	12b:
14 Income tax withheld by payer of third-party sick pay:	
18 Local wages, tips, etc.	19 Local income tax
Employer's telephone number: (720) 318-0173	For Official Use Only.
Employer's email address:	

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

REFERENCE COPY PREPARED BY PAYCHEX DO NOT FILE

Signature Title Date

Form **W-3 Transmittal of Wage and Tax Statements** 2021 Department of the Treasury Internal Revenue Service

DO NOT FILE

YOUR FEDERAL W-2 & W-3 DATA IS FILED ELECTRONICALLY