REISSUED	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website		
STATEMENT	71	L2-30-9053	OMB N	o. 1545-0	008 FAST! U	se	e~file	at www.i	rs.gov/efile.	
b Employer identification number				1	Wages, tips, other comp	pensation	2 Fede	ral income ta	x withheld	
59-2619002				56126.97			884	8849.14		
c Employer's name, address, and	ZIP code		•	3 Social security wages			4 Socia	4 Social security tax withheld		
Tucker Inc Inc				70549.45				5397.03		
53418 Kara Overpass Suite 475 South Ryanburgh OK 86393-1306				5 Medicare wages and tips			6 Medi	• modical o tax maniola		
					45596.04			1322.29		
				7 Social security tips			8 Alloc			
				70549.45				45596.04		
d Control number			9	Advance EIC payment		10 Depe	endent care be	enefits		
3720481								270		
e Employee's first name and initia	l Last name			11	Nonqualified plans		12a See	instructions	for box 12	
Lori Garcia			200			G	G 5099			
Lori Gar	Cla			13 Stat	utory Retirement loyee plan	Third-party sick pay	12b	ı		
41143 Jeffrey Stream			Citig	X	Sick pay	D	623			
Martinborough OH 44678-3027			14 Other (see enclosed Notice to Employee)			ee) 12c				
Marcinborough on 44070 3027								190		
							12d			
								634		
f Employee's address and ZIP co	nde.						-	034		
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips	, etc.	19 Local income	ax	20 Locality name	
MT 028-4	5-949	29388.99	2406.78		68936.03		6449.48		Julie Common	
4-6-0					44.455.04		4400= 0			
MI 156-0	1-383	30651.89	3133.96		41457.01		11005.69	,	Sean Dam	

Wage and Tax

Form W-2 **Statement**Copy B--To Be Filed with Employee's FEDERAL Tax Return

5070

Department of the Treasury--Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

F	REISSUED	a Employee's socia	Il security number			This information is being furnis	hed to	the Internal Rev	venue Servi	ice. If you are required
	TATEMENT	71	2-30-9053	OMB N	OMB No. 1545-0008 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.					
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
59-2619002				56126.97			8849.14			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Tucker Inc Inc				70549.45			5397.03			
53418 Kara Overpass Suite 475 South Ryanburgh OK 86393-1306				5 Medicare wages and tips			6 Medicare tax withheld			
				45596.04			1322.29			
				7 Social security tips			8 Allocated tips			
				70549.45			45596.04			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
3720481				ļ			270			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Lori Garcia			200			G 5099				
			13 Statu	ory Retirement Third-party		12b				
41143 Jeffrey Stream Martinborough OH 44678-3027				employee plan sick pay			D 623			
				14 (12c	023		
				14 Other (see enclosed Notice to Employee)			120			
_							190			
						12d				
				!			634			
f Employee's address and ZIP code								•		
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		9 Local income tax		20 Locality name
MT	028-45	5-949	29388.99	2406.78		68936.03		49.48		Julie Common
MT	156 01	202	20651 00	2122 06		41.457.01		00E 60		G D
MI	156-01	383	30651.89	3133.96		41457.01	1 T T	005.69		Sean Dam

Wage and Tax

Form W-2 **Statement**Copy C For EMPLOYEE'S RECORDS.
(See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

