REISSUED	a Employee's social security number			Safe, Accurate,				Visit the IRS Website		
STATEMENT	70	8-70-0249	OMB N	No. 1545-00	008 FAST! Us	e		at www.i	rs.gov/efile.	
b Employer identification number				1 \	1 Wages, tips, other compensation			Federal income tax withheld		
74-9035677					107833.68			28225.24		
c Employer's name, address, and ZIP code				3 5	3 Social security wages			4 Social security tax withheld		
Merritt-Livingston Ltd				81008.73			61	6197.17		
7285 Andrea Skyway Apt. 302				5 Medicare wages and tips			6 M			
				79713.86			2311.7			
Lake Craigside IA 23621-9382				7 Social security tips			8 AI	8 Allocated tips		
				81008.73				79713.86		
d Control number				9 /	9 Advance EIC payment			10 Dependent care benefits		
2921220								286		
e Employee's first name and initial Last name				11 Nonqualified plans			12a S	12a See instructions for box 12		
			117]	P 3671			
Brian Jacobs				13 Statu		Third-party sick pay	12b	1		
00239 Heather Manors				x			I	D 803		
East Kimberly NC 47656-2202				14 (Other (see enclosed Notice	ce to Employee	e) 12c	j i		
								433		
								12d		
								654		
f Employee's address and	ZIP code							l .		
15 State Employer's state	e ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, o	etc. 1	9 Local incon	ne tax	20 Locality name	
GA 622	-49-043	50861.62	4709.92		80504.81	1	L1607.	75	Calhoun Forges	
NC 182	-08-607	53902.78	5911.97		137217.25	1	19712.:	29	Elizabeth Loaf	

Wage and Tax

Form W-2 Statement

5010

Department of the Treasury--Internal Revenue Service

Copy B--To Be Filed with Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

REISSUED	a Employee's so	cial security number		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						
STATEMENT	7	708-70-0249	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	per			1 \	Vages, tips, other compensation		2 Federal	income tax	x withheld	
74-9035677					107833.68			28225.24		
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Merritt-Livingston Ltd					81008.73			6197.17		
7285 Andrea Skyway Apt. 302 Lake Craigside IA 23621-9382				5 Medicare wages and tips			6 Medicare tax withheld			
				79713.86			2311.7			
				7 Social security tips			8 Allocated tips			
				81008.73			79713.86			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
2921220							286			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Brian Jacobs				117			P	P 3671		
					13 Statutory Retirement Third-party employee plan sick pay			Ī		
00239 Heather Manors				X Successful			D	D 803		
East Kimberly NC 47656-2202				14 (Other (see enclosed Notice to Employ	/ee)	12c	Ī		
Hast Rimberry No. 17030 2202						433				
						12d				
								654		
f Employee's address and ZIP code					T				T	
15 State Employer's state		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		_ocal income tax		20 Locality name	
GA 622-	49-043	50861.62	4709.92		80504.81	11	607.75		Calhoun Forges	
NC 182-	08-607	53902.78	5911.97		137217.25	19	712.29		Elizabeth Loaf	

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

