R	REISSUED	a Employee's socia	l security number			Safe, A	ccurate,	19 0	le)	Visit the	IRS Website	
ST	FATEMENT	86	3-50-2633	OMB N	o. 1545-0	008 FAST!	Use	G	116	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld			
24-3421744					212420.23				60524.09			
c Emplo	yer's name, address, and 2	ZIP code			3 Social security wages				4 Social security tax withheld			
Johnson LLC Inc					222884.83				17050.69			
98022 Courtney Rapid Apt. 763 Davidtown IA 20868-9326					5 Medicare wages and tips				6 Medicare tax withheld			
					200737.01				5821.37			
'	Daviacown	IN 20000	3320		7 Social security tips				8 Allocated tips			
					222884.83				200737.01			
d Contro					9 Advance EIC payment 10 Dependent care benefits					enefits		
	6178017								114			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
						227			9358			
Daniel Garrett 92301 Jessica Tunnel Taylorfort FL 53567-7480					13 Statutory Retirement Third-party sick pay 14 Other (see enclosed Notice to Employee)					1		
										498	98	
										1		
									874			
									12d			
									E	847		
	yee's address and ZIP cod											
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, ti	ps, etc.	19 Local i	ncome tax	(20 Locality name	
NH	613-38	-643	116757.69	4707.12		152811.4	7	42312	2.51		Lisa Light	s
NV	269-61	-776	103974.85	4657.01		275495.6	i3	2792	9.95		Sean Straven	ue

Wage and Tax Statement 5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement
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.

F	REISSUED		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 863-50-2633 OMB No					this income is taxable and you fail to report it.						
b Emplo	b Employer identification number					Wages, tips, other compensation	Federal income tax withheld					
24-3421744					212420.23			60524.09				
c Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Johnson LLC Inc 98022 Courtney Rapid Apt. 763					222884.83			17050.69				
					5	Medicare wages and tips	6 Medicare tax withheld 5821.37					
						200737.01						
Davidtown IA 20868-9326					7	Social security tips	8 Allocated tips					
						222884.83	200737.01					
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	6178017								114			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Daniel Garrett					13 State		9358					
	92301 Jessica Tunnel					employee plan sick pay			498			
	Taylorfort FL 53567-7480				14 Other (see enclosed Notice to Employee)			12c				
								874				
								12d				
									E 847			
f Emplo 15 State	yee's address and ZIP co		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10	Local income tax		20 Locality name		
	Employer's state ID n		9			1.0				1		
NH	613-38	3-643	116757.69	4707.12	152811.47 4		42	12312.51		Lisa Lights		
NV	269-63	L-776	103974.85	4657.01		275495.63	27	929.95		Sean Stravenue		

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

