F	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website						IRS Website		
S	TATEMENT	26	59-55-4961		OMB No. 15	45-0008	FAST! U	se	$\mathcal{G}^{\sim}$ I	ile	at www.i	rs.gov/efile.	
<b>b</b> Employer identification number					1 Wages, tips, other compensation				2	2 Federal income tax withheld			
50-5956477						88536.86				29209.75			
c Employer's name, address, and ZIP code						3 Social security wages			4	4 Social security tax withheld			
Gardner, Middleton and West Inc						77988.84				5966.15			
969 James Drive					5	5 Medicare wages and tips			6	6 Medicare tax withheld			
						98645.26				2860.71			
	East Kimber	riysnire	RI 75	359-278	7	Social se	curity tips		8	Allocat	ed tips		
							88.84				9864	5.26	
<b>d</b> Contro	ol number				9	9 Advance EIC payment			10	10 Dependent care benefits			
	8896117									165			
e Employee's first name and initial Last name					11	11 Nonqualified plans			12a	12a See instructions for box 12			
					237				н 4393				
Dylan Parker 777 Rivera Summit Johnfurt GA 61432-7265					13 Statutory Retirement Third-party			12b					
						employee plan sick pay  14 Other (see enclosed Notice to Employee)					851		
					14				ee) 12c		ı		
									P	352			
								12d	12d				
										D	430		
f Emplo	ovee's address and ZIP cod	le.									130		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State inco	ome tax	18 Lo	cal wages, tips,	etc.	19 Local i	ncome tax	(	20 Locality name	
GA	740-68	-499	48681.06	2169.7	71	945	82.11		1235	5.06		Evan Drive	
AL	050-96	5-593	42967.99	1759.9	91	109	119.12		16485	5.54		Villarreal Brook	

Wage and Tax

5070 **Statement** 

Department of the Treasury--Internal Revenue Service

Form W-2 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 socia	al security number			This information is being furnis	hed to the	Internal Re	venue Serv	ice. If you are required		
STATEMENT	to file a tax return, a negligence penalty or other sanction may be imposed on you								e imposed on you if		
<b>b</b> Employer identification number	1 V	Vages, tips, other compensation	2	2 Federal income tax withheld							
50-5956477		88536.86		29209.75							
c Employer's name, address, and	3 8	3 Social security wages			4 Social security tax withheld						
Gardner, M		77988.84			5966.15						
969 James 1	5 N	Medicare wages and tips	6	6 Medicare tax withheld 2860.71							
		98645.26									
East Kimbe	rlyshire	<b>7</b> S	Social security tips	8	8 Allocated tips						
		77988.84		98645.26							
d Control number					9 Advance EIC payment			10 Dependent care benefits			
8896117	8896117							165			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
	Dylan Parker						н 4393				
Dylan						12	b				
777 Rivera Summit					employee plan sick pay			851			
Johnfurt	14 (	Other (see enclosed Notice to Employ	ee) 12	12c							
Johnfurt GA 61432-7265								P 352			
						12	12d				
						'-	-	ĺ			
							D	430			
f Employee's address and ZIP co		Transis is a			Lie i i i i				Lag I III		
15 State Employer's state ID n		1	17 State income to	ax	18 Local wages, tips, etc.		l income ta	(	20 Locality name		
GA 740-6	8-499	48681.06	2169.71		94582.11	1235	6.06		Evan Drive		
AL 050-9	6-593	42967.99	1759.91		109119.12	1648	5.54		Villarreal Brook		

Wage and Tax

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



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

