REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website							
STATEMENT 262-23-4480	OMB N	o. 1545-0008	FAST! Use		≁file >	at www.irs.gov/efile.			
b Employer identification number			tips, other compensat	tion	2 Federal income tax withheld				
20-5673901			6081.24		30800.22				
c Employer's name, address, and ZIP code			ecurity wages		4 Social security tax withheld				
Cooke-Williams and Sons			5244.8		11876.23				
4594 Jason River Apt. 657			e wages and tips		6 Medicare tax withheld				
West Kennethside RI 35006-6494			7420.06		5145.18				
Nest hemiculated his 35000 of		ecurity tips		8 Allocated tips					
			155244.8 9 Advance EIC payment			177420.06			
d Control number			e EIC payment		10 Depend	dent care benefits			
6425663						249			
e Employee's first name and initial Last name		11 Nonqual	lified plans		12a See ins	structions for box 12			
Mercedes Cook 446 Burke Grove Haleytown AL 39315-2760			143			D 6062			
			13 Statutory Retirement Third-party employee plan sick pay			_			
					G	431			
			ee enclosed Notice to	Employee)	12c	I			
					E	755			
						12d			
						544			
f Employee's address and ZIP code									
15 State Employer's state ID number 16 State wages, tips, etc.	17 State income tax	18 Lo	ocal wages, tips, etc.	19	Local income tax	20 Locality name			
AK 598-95-325 101915.01	14615.67	202	2230.51	29	975.16	Kelley Points			
ND 682-08-664 101963.8	10303.24	277	7096.15	36	5573.94	David Islands			

Wage and Tax

Form W-2 Statement

5070

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.

F	REISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
_	TATEMENT	20	62-23-4480	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 Emplo	b Employer identification number				1	Wages, tips, other compensation		2 Federal income tax withheld			
20-5673901				216081.24			30800.22				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Cooke-Williams and Sons				155244.8			11876.23				
4594 Jason River Apt. 657 West Kennethside RI 35006-6494				5 Medicare wages and tips 177420.06			6 Medicare tax withheld 5145.18				
											7 Social security tips
									155244.8		
d Control number			9 Advance EIC payment			10 Dependent care benefits					
6425663						249					
e Emplo	e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Mercedes Cook 446 Burke Grove Haleytown AL 39315-2760			143			D 6062					
			13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			12b					
							G	431			
						12c					
							E	755			
						12d		1.00			
							544				
f Employee's address and ZIP code											
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	10 =====		1	Local income tax 20 Locality name			
AK	598-95	325	101915.01	14615.67		202230.51	29	975	.16		Kelley Points
ND	682-08	-664	101963.8	10303.24		277096.15	36	5573	. 94		David Islands

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

