R	EISSUED	a Employee's socia	Employee's social security number Safe, Accurate,					90 1	HI	Visit the	IRS Webs	ite		
ST	ATEMENT	64	8-89-1764	OMB N	o. 1545-0	DOS FAST!	Use	G	file	at www.i	rs.gov/efile).		
b Employ	er identification number				1 \	1 Wages, tips, other compensation			2 Federal income tax withheld					
(02-2474551				63535.25				10546.28					
c Employ	er's name, address, and 2	ZIP code			3 Social security wages				4 Social security tax withheld					
	Jackson-Jon	es Inc			51368.41				3929.68					
972 Patricia Estates					5 Medicare wages and tips				6 Medicare tax withheld					
					61890.82				1794.83					
١	Wolfeland KY 77110-1648					7 Social security tips				8 Allocated tips				
					51368.41				61890.82					
d Control	Inumber				9 Advance EIC payment				10 Dependent care benefits					
•	7861205								112					
e Employee's first name and initial Last name					11 Nonqualified plans			12	12a See instructions for box 12					
				292				н 9793						
Gabriel Ford 300 Kimberly Key Cobbland OR 70839-1866					13 Statutory Retirement Third-party employee Plan Sick pay 14 Other (see enclosed Notice to Employee)				2b					
									D	D 742				
									?c	1				
									D	999				
				12d										
									G	909				
f Employee's address and ZIP code								-		1				
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	!	18 Local wages, t	ps, etc.	19 Loca	l income tax	(20 Locality	name /		
TN	022-77	-419	30203.4	3999.21		55508.93		6504	6504.32		Sara	Fort		
OR	706-16	-509	32427.06	2742.07		45815.18	3	1162	21.65		Richards	on Ferry		

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	oyee's social security number This information is being furnished to the Internal Revenue Service. If you are required											
S	TATEMENT	64	48-89-1764	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					Wages, tips, other compensation				2 Federal income tax withheld					
02-2474551						63535.25				10546.28				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Jackson-Jones Inc						51368.41				3929.68				
972 Patricia Estates Wolfeland KY 77110-1648						5 Medicare wages and tips				6 Medicare tax withheld				
						61890.82				1794.83				
						7 Social security tips				8 Allocated tips				
					51368.41				61890.82					
d Control number					9 Advance EIC payment				10 Dependent care benefits					
	7861205					112								
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12					
						292				н 9793				
Gabriel Ford 300 Kimberly Key Cobbland OR 70839-1866					13 Statutory Retirement Third-party				12b					
					employee plan sick pay				D	742				
					14 Other (see enclosed Notice to Employee)									
					14 Other (see enclosed Notice to Employee)				126					
									D 999					
								12d		i				
										909				
f Employee's address and ZIP code									l					
15 State	Employer's state ID n	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		9 Local income tax			20 Locality name			
TN	022-77	7-419	30203.4	3999.21		55508.93		504.	32		Sara	Fort		
OR	706-16	5-509	32427.06	2742.07		45815.18		.1621.65			Richards	on Ferry		

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

