REISSUED a Employee's soci	•			Safe, A	ccurate,	SO 1/1	H	Visit the	IRS Website		
STATEMENT 42	26-78-4726	OMB N	o. 1545-00	008 FAST!	Use	G <sup>*</sup> L	ile	at www.i	rs.gov/efile.		
<b>b</b> Employer identification number			1 V	Vages, tips, other co	mpensation	2	Federa	l income ta:	x withheld		
35-3835247				138994.9	9		2183	4.7			
c Employer's name, address, and ZIP code			3 8	ocial security wages	3	4	Social	security tax	withheld		
Giles and Sons Inc				172764.87			13216.51				
338 Hill Ramp			5 Medicare wages and tips				6 Medicare tax withheld				
West Barry NE 81037-9848			112319.36				3257.26				
West Bally NE 01037-3040				7 Social security tips				8 Allocated tips			
				172764.87			112319.36				
d Control number			9 A	dvance EIC paymer	nt	10	Depen	dent care be	enefits		
6593318								163			
e Employee's first name and initial Last nam	е		11 N	lonqualified plans		128	See in	structions	for box 12		
			285				G 1487				
Jasmine Gray 86004 Gary Flats Port Jonhaven WY 87693-3851			13 Statutory Retirement Third-party sick pay  14 Other (see enclosed Notice to Employee)			121	)	1			
							н 59				
						/ee) <b>12</b> 0	;	1			
							E	565			
						120	12d				
								574			
f Employee's address and ZIP code											
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	!	18 Local wages, ti	ps, etc.	19 Local	income tax	(	20 Locality name		
GA 265-85-900	63505.1	7066.35	131125.75 1		1792	7923.1		Roberson Drives			
DE 062-66-443	74449.73	6248.63	·	168826.5	66	1943	0.51		Stacey Shore		

Wage and Tax

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	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	4:	26-78-4726	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			Federal income tax withheld				
35-3835247				138994.99			21834.7				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Giles and Sons Inc				172764.87			13216.51				
338 Hill Ramp				5 Medicare wages and tips			6 Medicare tax withheld				
West Barry NE 81037-9848				112319.36			3257.26				
				7 Social security tips			8 Allocated tips				
					172764.87			112319.36			
d Control number				9 Advance EIC payment			10 Dependent care benefits				
6593318							163				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Jasmine Gray			285  13 Statutory Retirement Third-party			G 1487					
				employee plan sick pay							
86004 Gary Flats				X		H	596				
Port Jonhaven WY 87693-3851			14 Other (see enclosed Notice to Employee)			12c	1				
						E	565				
						12d					
						574					
f Employee's address and ZIP code  15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax				140	40.1-	ocal income tax		20. Lassituassa			
15 State			16 State wages, tips, etc.			18 Local wages, tips, etc.				20 Locality name	
GA	265-85	5-900	63505.1	7066.35		131125.75	T/6	923.1		Roberson Drives	
DE	062-66	5-443	74449.73	6248.63		168826.56	194	430.51		Stacey Shore	

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

