REISSUED a Employee's social security number		Safe	, Accurate,		Visit the IRS Website	
STATEMENT 594-82-942	8 OMB No	o. 1545-0008 FAS	Γ! Use	Tile	at www.irs.gov/efile.	
b Employer identification number		 Wages, tips, other 	compensation	2 Federal	income tax withheld	
03-7263261	76490.8	31	21241.26			
c Employer's name, address, and ZIP code		 Social security was 	jes	4 Social security tax withheld		
Kelley-Benson and Sons	68631.9	3	5250.34			
28075 Carlos Overpass	5 Medicare wages a	•	6 Medicare tax withheld			
Paulport WV 21180-9308	75814.9	•	2198.63			
Faulpoit WV 21100 9500	7 Social security tips		8 Allocated tips			
		68631.9	_		75814.97	
d Control number		9 Advance EIC payr	nent	10 Depend	lent care benefits	
6460910				138		
e Employee's first name and initial Last name		11 Nonqualified plans		12a See ins	structions for box 12	
Wathman Madamial	225		н 1952			
Kathryn Mcdaniel	13 Statutory Retirem employee plan	ent Third-party sick pay	12b			
714 Melissa Station	X	SICK Pay	G	525		
East Wesley PA 97496-1	14 Other (see enclose	ed Notice to Employee)	12c			
				G	105	
				12d		
				G	194	
f Employee's address and ZIP code						
15 State Employer's state ID number 16 State wages, til	ps, etc. 17 State income tax	18 Local wages	, tips, etc. 19	Local income tax	20 Locality name	
CA 471-91-952 36118.78	3459.94	65626.4	1 81	164.66	Rush Course	
AL 464-41-891 39009.24	2360.17	91835.3	37 11	1039.55	Wilson Plaza	

Wage and Tax

Form W-2 Statement

5010

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.

R	REISSUED	a Employee's socia	I security number			This information is being furnis	hed to	the Internal Re	venue Serv	ice. If you are required		
	TATEMENT	59	94-82-9428	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				1 Wages, tips, other compensation 2 Federal income			l income tax	withheld				
03-7263261				76490.81			21241.26					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Kelley-Benson and Sons				68631.93			5250.34					
28075 Carlos Overpass				5 Medicare wages and tips			Medicare tax withheld					
Paulport WV 21180-9308				75814.97			2198.63					
				7 Social security tips			8 Allocated tips					
				68631.93			75814.97					
d Control number			9 Advance EIC payment			10 Dependent care benefits						
6460910								138				
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box			for box 12						
Kathryn Mcdaniel			225			н 1952						
			13 Statu			12b						
714 Melissa Station				emple	pyee plan sick pay		G	525				
East Wesley PA 97496-1761					14 Other (see enclosed Notice to Employee)			12c				
							G	105				
							12d					
								120	ĺ			
								G	194			
	yee's address and ZIP coo											
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax				9 Local income tax		20 Locality name		
CA	471-91	-952	36118.78	3459.94		65626.41 83		164.66		Rush Course		
AL	464-41	-891	39009.24	2360.17		91835.37	11	.039.55		Wilson Plaza		

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

