F	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website						ite		
S	TATEMENT	02	28-09-5193	OMB N	o. 1545-0	8000	FAST! Us	e 🐃	5	file	at www.i	rs.gov/efile) .
b Employer identification number					1	1 Wages, tips, other compensation				2 Federal income tax withheld			
85-3790872						55618.77				5810.88			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Garner-Jensen Group					40581.93					3104.52			
71861 Baldwin Mews East Samuelview AL 98685-3184					5 Medicare wages and tips				(6 Medicare tax withheld			
					52096.68					1510.8			
					7 Social security tips					8 Allocated tips			
						40581.93				52096.68			
d Control number					9 Advance EIC payment 10								
9435584											153		
e Employee's first name and initial Last name					11 Nonqualified plans			1:	12a See instructions for box 12				
					197					4816			
Derek Goodwin 508 Katrina Landing Apt. 969 New Taylor VA 11945-9681					13 Statutory Retirement Third-party employee plan sick pay				1:	2b	1		
					mployee plan sick pay 14 Other (see enclosed Notice to Employee)					926			
									ee) 12	12c			
										D 978			
									1:	12d			
						ļ				G	525		
f Emple	ovee's address and ZIP cod	0								<u> </u>	323		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips,	etc.	19 Loca	al income ta	х	20 Locality	name
WI	699-03	-841	29529.82	2358.15		6837	3.68		6641	L.81		Reid	Crest
WA	391-94	-556	27279.44	2582.47		4998	2.55		8072	2.61		Glover	Valleys

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.

REISSUED	a Employee's soci	al security number							vice. If you are required		
STATEMENT 028-09-5193 OMB N				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 comp	ensation	2 Fe	Federal income tax withheld			
85-3790872					55618.77		58	5810.88			
c Employer's name, address, and	3	3 Social security wages			4 Social security tax withheld						
Garner-Jensen Group					40581.93		31	3104.52			
71861 Baldwin Mews					Medicare wages and tips		6 M	• modicalo tax maniola			
East Samuelview AL 98685-3184					52096.68			1510.8			
					Social security tips		8 AI	8 Allocated tips			
					40581.93			52096.68			
d Control number				9	9 Advance EIC payment			10 Dependent care benefits			
9435584								153			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
					197			4816			
Derek Goodwin 508 Katrina Landing Apt. 969 New Taylor VA 11945-9681					13 Statutory Retirement Third-party employee plan sick pay			12b			
					employee plan sick pay			926			
					Other (see enclosed Not	ce to Employee	e) 12c	12c			
								978			
							12d	12d			
								525			
f Employee's address and ZIP co	de										
15 State Employer's state ID n		16 State wages, tips, etc.	17 State income tax	:	18 Local wages, tips,	etc. 1	19 Local incom	ne tax	20 Locality name		
WI 699-0	3-841	29529.82	2358.15		68373.68	(6641.8	1	Reid Crest		
WA 391-9	4-556	27279.44	2582.47		49982.55	8	8072.6	1	Glover Valleys		

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

