	REISSUED a Employee's social security number				Safe, Accurate,					Visit the IRS Website				
ST	TATEMENT 859-11-3978			OMB N	MB No. 1545-0008 FAST! Use				at www.irs.gov/efile.					
<b>b</b> Employ	yer identification number				Wages, tips, other compensation				2	Federal i	income tax	withheld		
33-5776806					66199.1				14740.87					
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Hart LLC Inc					64996.65				4972.24					
95320 Hess Shore Suite 457 Jacksonfurt NC 30095-2558					5 Medicare wages and tips				6 Medicare tax withheld					
					77582.94				2249.91					
					7 Social security tips				8 Allocated tips					
						64996.65				77582.94				
d Control number					9	Advance EIC p	ayment		10	Depende	ent care be	enefits		
	3383546										119			
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12					
Raymond Glenn					216  13 Statutory Retirement Third-party employee plan sick pay				D 4274					
									12b					
3597 Nicholas Radial Edwardborough AR 04872-1212						employee plan sick pay					565			
						14 Other (see enclosed Notice to Employee)				12c				
									D 582					
								F	12d					
											638			
f Employee's address and ZIP code								-			030			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	<u>.                                    </u>	18 Local wa	ges, tips, etc.	19 L	ocal inc	ome tax		20 Locality	/ name	
UT	643-61	-879	33339.8	1533.89		81562.89 7		79	7976.01			Eric	Glen	
				<u> </u>								<u> </u>		
OK	821-63	-005	31753.75	1842.6	51668.93 93		93	9379.46			Michael	Trail		

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.

	ISSUED	a Employee's socia	•	0.45.44	This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if									
	STATEMENT 039 II 3970					this income is taxable and you fail to report it.								
	identification number		1 Wages, tips, other compensation				Federal income tax withheld							
33-5776806						66199.1				14740.87				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Hart LLC Inc						64996.65				4972.24				
95320 Hess Shore Suite 457						5 Medicare wages and tips				6 Medicare tax withheld				
Jacksonfurt NC 30095-2558					77582.94				2249.91					
					7 Social security tips				8 Allocated tips					
					64996.65				77582.94					
d Control number					9 Advance EIC payment				10 Dependent care benefits					
3383546										119				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12					
Raymond Glenn						216  13 Statutory Retirement Third-party				D 4274				
3597 Nicholas Radial Edwardborough AR 04872-1212					employee plan sick pay									
								565						
					14 Other (see enclosed Notice to Employee)				12c					
									D	582				
							ŀ	12d						
									638					
	's address and ZIP coo		T	T.= 2		T					1			
	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		· · · · · · · · · · · · · · · · · · ·		9 Local income tax			20 Locality			
UT	643-61	L-879	33339.8	1533.89	81562.89 7		79	7976.01			Eric	Glen		
OK	821-63	3-005	31753.75	1842.6	51668.93		93	379.46			Michael	Trail		

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

