REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS Website					
STATEMENT 096-75-8458	OMB No. 1545-0	DOS FAST! Use	at www.irs.gov/efile.			
b Employer identification number	1	Wages, tips, other compensation	Federal income tax withheld			
84-0292182		77310.07	25334.83			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security tax withheld			
Keller, Martin and Powell PLC		74527.37	5701.34			
225 Wright Trail	5	Medicare wages and tips	6 Medicare tax withheld			
Lake Michaelfort TX 63694-9802	<u> </u>	79147.97	2295.29			
Lake Highacitott	7	Social security tips	8 Allocated tips			
d Control number		74527.37 Advance EIC payment	79147.97			
	9	Advance EIC payment				
2081519			104			
e Employee's first name and initial Last name	11	Nonqualified plans	12a See instructions for box 12			
Mr. Luke		198	7929			
Mr. Luke	13 State	tory Retirement Third-party oyee plan sick pay	y 12b			
241 Collins Harbor	emp	X	730			
West Thomas SD 33458-9602	14	Other (see enclosed Notice to Emplo	oyee) 12c			
			P 153			
			12d			
			D 239			
f Employee's address and ZIP code			•			
15 State Employer's state ID number 16 State wages, tips, etc. 17 State in the state wages, tips, etc.	income tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name			
KS 154-49-180 38158.86 1903	.72	86065.92 14709.52				
SC 798-88-522 37599.15 2421	. 97	88142.06	9243.72 Gregory Meadon			

Wage and Tax

5070 **Statement**

Department of the Treasury--Internal Revenue Service

Form W-2 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.

REISSU	IFD	a Employee's socia	I security number		This information is being furnished to the Internal Revenue Service. If you are required							
STATEM	_	09	6-75-8458	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 identific	cation number			I	1 Wages, tips, other compensation				2 Federal income tax withheld			
84-0292182				77310.07			25334.83					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Keller, Martin and Powell PLC				74527.37			5701.34					
225 Wright Trail				5 Medicare wages and tips			6 Medicare tax withheld					
_				79147.97			2295.29					
Lake Michaelfort TX 63694-9802			7 Social security tips			8 Allocated tips						
				74527.37			79147.97					
d Control number			9 Advance EIC payment			10 Dependent care benefits						
2081519							104					
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12						
			198			7929						
Mr. Luke 241 Collins Harbor West Thomas SD 33458-9602				13 Statu			12b					
				employee plan sick pay X 14 Other (see enclosed Notice to Employee)			730					
							12c					
West Thomas SD 33458-9602			_				1 - 2					
			P 153									
								120	Ì			
							D 239					
f Employee's addr	ess and ZIP cod	е										
15 State Emplo	yer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		9 Local income tax		20 Locality name		
KS	154-49	-180	38158.86	1903.72		86065.92		4709.52		White Fields		
				0.404 05		001.10.06						
SC	798-88	-522	37599.15	2421.97		88142.06 92		243.72		Gregory Meadows		

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

