REISSUED a Employee's social security number		Safe, Accurate,		the IRS Website		
STATEMENT 391-45-9519	OMB No. 1545-0	008 FAST! Use	at w	ww.irs.gov/efile.		
<b>b</b> Employer identification number	1 '	Wages, tips, other compensation	2 Federal incom	ne tax withheld		
06-1687203		77359.35	17249.4	17249.43		
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security	4 Social security tax withheld		
King-Carter Inc		70240.15	5373.37	5373.37		
93973 Bailey Knoll	5	Medicare wages and tips				
Port Jessicaville TX 19027-7480		65777.31		1907.54		
FOIL DESSICAVILLE IX 19027-7400	7	Social security tips	·	8 Allocated tips		
		70240.15		65777.31		
d Control number	9	Advance EIC payment	· ·			
2121053			13	130		
e Employee's first name and initial Last name	11	Nonqualified plans	12a See instructi	12a See instructions for box 12		
		206	P 89	P 8917		
Susan Elliott	13 State		12b			
97326 Matthew Lodge Suite 651	епр	loyee plan sick pay	86	869		
Curtisburgh SC 37438-1588	14	Other (see enclosed Notice to Employ	yee) 12c			
<b>,</b>			85	3		
			12d	12d		
			23	8		
f Employee's address and ZIP code						
	te income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
MA 380-69-272 36264.04 163	1.69	60514.08	8237.41	Brittney Union		
LA 770-90-587 34825.89 145	3.65	96159.95	10359.21	Ramirez Terrace		

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 socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	39	91-45-9519	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>b</b> Emplo	oyer identification number			<u>.</u>	Wages, tips, other compensation			2 Federal income tax withheld			
06-1687203				77359.35			17249.43				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
King-Carter Inc				70240.15			5373.37				
93973 Bailey Knoll				5 Medicare wages and tips 65777.31			6 Medicare tax withheld 1907.54				
Port Jessicaville TX 19027-7480											
			7 Social security tips			8 Allocated tips					
			70240.15			65777.31					
<b>d</b> Contro	d Control number			9 Advance EIC payment			10 Dependent care benefits				
2121053				1			130				
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box			for box 12					
Susan Elliott			206			P 8917					
			13 Statu			12b	1				
97326 Matthew Lodge Suite 651				employee plan sick pay				869			
Curtisburgh SC 37438-1588			14 Other (see enclosed Notice to Employee)			12c					
						853					
								12d			
						238					
	oyee's address and ZIP cod		Total Control	T.= -		T	1			T	
15 State	, .,		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality name	
MA	380-69	9-272	36264.04	1631.69		60514.08	82	37.41		Brittney Union	
LA	770-90	-587	34825.89	1453.65	96159.95 10359.21 Ramirez		Ramirez Terrace				

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

