REISSUED a Employee's social security n	umber	Safe, Accurate, Visit the IRS Website						
STATEMENT 595-12-	-76 4 2	MB No. 1545-0008	FAST! Use		tile at	t www.irs.gov/efile.		
b Employer identification number	•	1 Wa	ges, tips, other compensation	n 2	Pederal inc	come tax withheld		
40-0377388			207049.12		25078.94			
c Employer's name, address, and ZIP code			ial security wages	4	4 Social security tax withheld			
Jones, Harris and Kim Inc			251457.66		19236.51			
981 Brian Highway Suite 824			licare wages and tips	6	6 Medicare tax withheld			
South Chelsea OH 73663-8528			.88378.56		5462.98			
			ial security tips	"	8 Allocated tips			
1. O satural security			251457.66	40		.88378.56		
d Control number			ance EIC payment	10		t care benefits		
1903565					269			
e Employee's first name and initial Last name		11 Nor	qualified plans	12	2a See instru	uctions for box 12		
Alexis Rojas			239			G 3720		
				d-party 12	2b			
467 Amy Fork Suite 767		employe X	e plan sick	pay	E 1	.32		
East David AL 559	974-9199	14 Oth	er (see enclosed Notice to E	mployee) 12	2c			
200 20120 112 005/1 5255					2	256		
				12	2d			
					2	241		
f Employee's address and ZIP code					<u> </u>			
15 State Employer's state ID number 16 State v	wages, tips, etc. 17 State income	e tax 1	8 Local wages, tips, etc.	19 Loca	al income tax	20 Locality name		
NH 391-81-431 99718	8.8 8529.39	2	267542.3	3220	7.63	Wilson Rapid		
IN 421-61-810 11252	29.27 11786.4	4 1	.82549.64	2965	53.77	Ramirez Passage		

Wage and Tax 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.

F	REISSUED	a Employee's soci	-		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								
S	TATEMENT	5:	95-12-7642	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.								
b Emplo	b Employer identification number				1 Wages, tips, other compensation					Federal income tax withheld			
40-0377388			207049.12					25078.94					
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld					
Jones, Harris and Kim Inc				251457.66				19236.51					
981 Brian Highway Suite 824 South Chelsea OH 73663-8528				5 Medicare wages and tips				6 Medicare tax withheld					
				188378.56					5462.98				
				7 Social security tips				8 Allocated tips					
					251457.66				188378.56				
d Control number			9 Advance EIC payment					10 Dependent care benefits					
	1903565											269	
e Employee's first name and initial Last name			11 Nonqualified plans					12a See instructions for box 12					
Alexis Rojas			239				G 3720						
			13 Statutory Retirement Third-party				12b		i.				
467 Amy Fork Suite 767			em)	ployee (plan	sick pay			E	132			
East David AL 55974-9199			14 Other (see enclosed Notice to Employee)				12c						
									256				
									-	12d		256	
										124			
								241					
	yee's address and ZIP co		Transis is a	Language and the second		1.0.			1.0				Lan I II
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax			cal wages, t	•		Local inc			20 Locality name
NH	391-81	L-431	99718.8	8529.39		267	542.3	3	32	207	. 63		Wilson Rapid
IN	421-61	L-810	112529.27	11786.44		182	549.6	54	29	653	.77		Ramirez Passage

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

