REISSUED	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website		
STATEMENT	- 1:	L5-59-2753	OMB N	o. 1545-0	008 FAST! Use		** file	at www.i	rs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
27-4665531				88843.39			14552.85			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld		
Mckee-Jackson and Sons					106688.94			8161.7		
505 Brian Unions Apt. 900				5 Medicare wages and tips			6 Medicare tax withheld			
Tanyahaven HI 52976-2763				65029.62			1885.86			
Tanyanaven ni 32970-2703				7 Social security tips			8 Allocated tips			
				106688.94			65029.62			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
6379356							190			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See i	12a See instructions for box 12		
Andrew Collier				168			D 1023			
717 Reed Shore Gibbsbury FL 78915-7412				13 Statutory Retirement Third-party sick pay Statutory Plan Statutory Plan Statutory Plan Statutory Plan Statutory Plan Plan			12b	1		
							P	P 145		
) 12c	ı		
							E	993		
			12d				12d			
								513		
f Employee's address and	I ZIP code									
	ate ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, et	c. 19	9 Local income to	ax	20 Locality name	
SC 38	2-20-202	40248.03	3561.34	71257.9 9479		479.46		Antonio Walk		
TN 74	9-77-216	46063.55	5096.1		94435.07	9	009.4		Paul Mountains	

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.

RE	ISSUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required						
	ATEMENT	11	.5-59-2753	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	r identification number	I.		JI.	1 V	/ages, tips, other compensation		Federal income tax withheld			
27-4665531					88843.39			14552.85			
c Employer'	c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Mckee-Jackson and Sons				106688.94			8161.7				
505 Brian Unions Apt. 900				5 Medicare wages and tips			6 Medicare tax withheld				
				65029.62			1885.86				
Та	Tanyahaven HI 52976-2763				7 Social security tips			8 Allocated tips			
				106688.94			65029.62				
d Control nu	d Control number				9 Advance EIC payment			10 Dependent care benefits			
63	6379356							190			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Andrew Collier				168			D 1023				
			13 Statutory Retirement Third-party employee plan sick pay			12b	ĺ				
7:	717 Reed Shore				x		P	145			
G	ibbsbury	FL	78915-7412		14 (Other (see enclosed Notice to Employe		12c	i		
								E 993			
								12d			
							513				
f Employee's address and ZIP code									T		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax	(20 Locality name	
SC	382-20	-202	40248.03	3561.34		71257.9	947	79.46		Antonio Walk	
TN	749-77	-216	46063.55	5096.1		94435.07	900	9.4		Paul Mountains	

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

