REISSUED a Employee's soci	ial security number			Safe, Accur	ate,		Visit the IRS Website	;	
STATEMENT 1	65-79-3502	OMB N	o. 1545-00	908 FAST! Use		*file	at www.irs.gov/efile.		
b Employer identification number		•	1 V	Vages, tips, other compen	sation	2 Federa	income tax withheld		
63-4804475			75696.81			23356.67			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Carter LLC PLC			87206.61			6671.31			
4061 Ethan Neck Apt. 207			5 N	Medicare wages and tips		6 Medicare tax withheld			
_			80106.16			2323.08			
Dianaton AK 64844-9302			7 Social security tips			8 Allocated tips			
				87206.61			80106.16		
d Control number			9 A	dvance EIC payment		10 Depend	lent care benefits		
4413856							255		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
			122			8027			
Chelsey Hopkins			13 Statutory Retirement Third-party employee plan sick pay			12b	1		
12316 Nancy Crest			empi	pyee plan	x sick pay	G	958		
Port Adrian AK 68580-7363			14 Other (see enclosed Notice to Employee)			12c	12c		
							295		
						12d			
						G	958		
f Employee's address and ZIP code						<u> </u>	336		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc	c. 19	Local income tax	20 Locality na	ame	
TN 964-19-738	38559.51	2370.12		83015.29	9	091.45	Dillon	Dam	
WV 539-78-466	34609.76	2535.23		63828.08	1	3015.48	Gonzales I	slands	

Wage and Tax

Form W-2 Statement

5010

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.

REIS	SSUED	a Employee's socia	l security number							rice. If you are required	
STAT	ΓEMENT	16	55-79-3502	OMI	1B No. 1545-0	to file a tax return this income is tax			nction may b	e imposed on you if	
b Employer identification number				1	,			2 Federal income tax withheld			
63-4804475					75696.81			23356.67			
c Employer's name, address, and ZIP code				3	3 Social security wages			4 Social security tax withheld			
Carter LLC PLC					87206.61			6671.31			
4061 Ethan Neck Apt. 207				5	gg			6 Medicare tax withheld			
_				80106.16			2323.08				
Dianaton AK 64844-9302				7	7 Social security tips			8 Allocated tips			
					87206.61			80106.16			
d Control number				9	9 Advance EIC payment			10 Dependent care benefits			
4413856								255			
e Employee's first name and initial Last name			11	11 Nonqualified plans			12a See instructions for box 12				
				122			8027				
Chelsey Hopkins			13 Stat		Third-party	12b					
12316 Nancy Crest				emp	employee plan sick pay			G 958			
Port Adrian AK 68580-7363				14	14 Other (see enclosed Notice to Employee)			12c			
								295			
				12d							
								G	958		
								G	936		
1	address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income t	tax	18 Local wages, tips,	etc. 1	19 Local income ta	ıx	20 Locality name	
TN	964-19		38559.51	2370.12		83015.29		9091.45		Dillon Dam	
				 		 				†	
WV	539-78	-466	34609.76	2535.23		63828.08	1	13015.48		Gonzales Islands	

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

