| REISSUED a Employee's social security number | | | | | | Safe, Accurate, | TES: | w.CH | | Visit the | IRS Website | | |
|--|-------------------------------|-----------|----------------------------|---------------------|---------------|--|------|------------|---------------------------------|------------------|------------------|--|--|
| S | TATEMENT | 13 | 35-17-9075 | OMB N | lo. 1545-0008 | FAST! Use | | | 6 | at www.i | rs.gov/efile. | | |
| b Employer identification number | | | | | | 1 Wages, tips, other compensation | | | Federal income tax withheld | | | | |
| 77-8176490 | | | | | | 165226.15 | | | 35817.58 | | | | |
| c Employer's name, address, and ZIP code | | | | | | 3 Social security wages | | | 4 Social security tax withheld | | | | |
| Morgan-Henson Inc | | | | | | 135063.39 | | | 10332.35 | | | | |
| 196 Young Roads | | | | | | 5 Medicare wages and tips | | | 6 Medicare tax withheld | | | | |
| | | | | | | 137640.74 | | | | 3991.58 | | | |
| | Jacksonville | e PA | 82370-3664 | | 7 Soc | 7 Social security tips | | | | 8 Allocated tips | | | |
| | | | | | 1 | 135063.39 | | | 137640.74 | | | | |
| d Control number | | | | | | Advance EIC payment | | | 10 Dependent care benefits | | | | |
| 4935761 | | | | | | | | | 172 | | | | |
| e Emplo | oyee's first name and initial | Last name | 9 | | 11 Nor | 1 Nonqualified plans | | | 12a See instructions for box 12 | | | | |
| | | | | | 1 | 137 | | | | н 4097 | | | |
| | Vanessa (| Christer | isen | | 13 Statutory | | | | | | | | |
| 96211 Edwards Prairie Apt. 236 Kendrabury PA 67852-5414 | | | | | employe | | | | | 381 | | | |
| | | | | | 14 Oth | | | | | | | | |
| | | | | | | | | | E | 167 | | | |
| | | | | | | | | | | 12d | | | |
| | | | | | | | | | G 39 | | | | |
| f Emple | ovee's address and ZIP code | | | | | | | | G | 390 | | | |
| 15 State | Employer's state ID num | | 16 State wages, tips, etc. | 17 State income tax | 1 | 8 Local wages, tips, etc. | 19 | Local inco | ome tax | : | 20 Locality name | | |
| MS | 369-43- | -306 | 82943.0 | 5413.79 | 1 | 25351.43 | 28 | 441 | . 42 | | Shaw Manor | | |
| MD | 709-47- | -544 | 74462.78 | 5666.58 | 1 | 134064.44 | | 2576.08 | | Morton Summit | | | |
| Wage and Tax | | | | | Π | Department of the TreasuryInternal Revenue Service | | | | | | | |
| Form W- | ₋₂ Stateme | 311£ | | | _ | | | | | | | | |

Statement 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.

| F | REISSUED a Employee's social security number | | | | 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 | | | | | | | |
|--|--|-----------|----------------------------|---|--|--|------|---------------------------------|------------------|------------------|--|--|
| | TATEMENT | 13 | 35-17-9075 | OMB No. 1545-0008 to file a tax return, a negligence penalty or other this income is taxable and you fail to report it. | | | | | | | | |
| b Employer identification number | | | | | 1 Wages, tips, other compensation | | | Federal income tax withheld | | | | |
| 77-8176490 | | | | | 165226.15 | | | 35817.58 | | | | |
| c Employer's name, address, and ZIP code | | | | | 3 Social security wages | | | 4 Social security tax withheld | | | | |
| Morgan-Henson Inc | | | | | 135063.39 | | | 10332.35 | | | | |
| 196 Young Roads | | | | | 5 Medicare wages and tips | | | 6 Medicare tax withheld | | | | |
| | | | | | 137640.74 | | | 3991.58 | | | | |
| | Jacksonville PA 82370-3664 | | | | | 7 Social security tips | | | 8 Allocated tips | | | |
| | | | | | | 135063.39 | | | 137640.74 | | | |
| d Contro | ol number | | | | 9 Advance EIC payment | | | 10 Dependent care benefits | | | | |
| | 4935761 | | | | | | | | 172 | | | |
| e Emplo | oyee's first name and initial | Last name |) | | 11 Nonqualified plans | | | 12a See instructions for box 12 | | | | |
| | | | | | 137 | | | н 4097 | | | | |
| | Vanessa Christensen | | | | | 13 Statutory Retirement Third-party employee plan sick pay | | | i | | | |
| 96211 Edwards Prairie Apt. 236 | | | | | Sick pay | | | P | 381 | | | |
| Kendrabury PA 67852-5414 | | | | | | 14 Other (see enclosed Notice to Employee) | | | l | | | |
| | | | | | ! | | | E | 167 | | | |
| | | | | | | | F | 12d | | | | |
| | | | | | | | | | 390 | | | |
| f Employee's address and ZIP code | | | | | | | | | • | | | |
| 15 State | Employer's state ID num | | 16 State wages, tips, etc. | 17 State income tax | | 18 Local wages, tips, etc. | 19 L | Local income ta | х | 20 Locality name | | |
| MS | 369-43- | -306 | 82943.0 | 5413.79 | | 125351.43 | 28 | 441.42 | | Shaw Manor | | |
| MD | 709-47- | -544 | 74462.78 | 5666.58 | | 134064.44 22 | | 576.08 | | Morton Summit | | |

Wage and Tax

Statement Form W-2 Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

