REISSUED a Employee's social security number		Safe, Accurate,			Visit the IRS Website				
STATEMENT 133-83-1344	OMB No. 15	45-0008 FAST! Use		≁file >	at www.irs.gov/efile.				
b Employer identification number	1	Wages, tips, other comper	sation	2 Federal	l income tax withheld				
86-0409983		226859.89		37060.65					
c Employer's name, address, and ZIP code	3	Social security wages		4 Social security tax withheld					
Brown Inc and Sons		191877.63		14678.64					
939 Kelsey Dam	5			6 Medicare tax withheld					
Franklinville KY 13979-8126		235510.34		6829.8					
FIGURIIIVIIIE RI 15575 6126	7			8 Allocated tips					
		191877.63		235510.34					
d Control number	9	Advance EIC payment		10 Depend	dent care benefits				
7605262					246				
e Employee's first name and initial Last name		Nonqualified plans		12a See instructions for box 12					
		178		5508					
Lori Bartlett	13	Statutory Retirement	Third-party	12b					
570 Katherine Burgs Apt. 248		employee plan	sick pay	D	149				
Pamelachester AR 85105-8360		Other (see enclosed Notic	e to Employee)	12c	1				
				160					
				12d					
				н	917				
f Employee's address and ZIP code					917				
	17 State income tax	18 Local wages, tips, e	c. 19	Local income tax	20 Locality name				
NE 966-03-043 116654.24 1	10732.49	291703.96	42	2078.18	James Forge				
NC 082-40-210 116479.03	13122.63	229378.83	30	371.91	Woods Course				

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.

RI	EISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required										
ST	ATEMENT	13	33-83-1344		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 identification number					1 Wages, tips, other compensation 2 Fee						ederal	deral income tax withheld			
86-0409983					226859.89					37060.65					
c Employer's name, address, and ZIP code					3 Social security wages					4 Social security tax withheld					
Brown Inc and Sons					191877.63					14678.64					
939 Kelsey Dam					5 Medicare wages and tips					6 Medicare tax withheld					
_				235510.34					6829.8						
Franklinville KY 13979-8126					7 Social security tips					8 Allocated tips					
					191877.63					235510.34					
d Control number					9 Advance EIC payment					10 Dependent care benefits					
7605262												246			
e Employee's first name and initial Last name			1	11 Nonqualified plans					12a See instructions for box 12						
Lori Bartlett				178					5508						
			1	13 Statutory Retirement Third-party employee plan sick pay					12b	ı					
570 Katherine Burgs Apt. 248									D 149						
Pamelachester AR 85105-8360			1	4 Ot	her (see enclo	sed Notice to	o Employe	ee)	12c						
rameraches cer An 03103 0300			!					160							
							-	12d							
											н	917			
	ee's address and ZIP coo														
15 State	Employer's state ID nu		16 State wages, tips, etc				18 Local wage				ocal inco			20 Locali	y name
NE	966-03	3-043	116654.24	10732	.49		291703	.96		420	078.	18		James	Forge
NC	082-40)-210	116479.03	13122	. 63		229378	.83		303	371.	91		Woods	Course

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

