REISSUED a Employee's social security number	D a Employee's social security number			Safe, Accurate, Visit th					
STATEMENT 577-04-5408	OMB N	o. 1545-0008	FAST! Use	J	≁file _	at www.i	irs.gov/efile.		
b Employer identification number			1 Wages, tips, other compensation			Federal income tax withheld			
26-6501092	149689.65			40536.52					
c Employer's name, address, and ZIP code	3 Social security wages			4 Social security tax withheld					
Marks-West Inc	188828.99			14445.42					
9928 Tyler Garden	5 Med	icare wages and tips	6 Medicare tax withheld						
_			44355.26	4186.3					
West Jamesview RI 45122-9624	7 Soci	al security tips	8 Allocated tips						
	188828.99			144355.26					
d Control number			9 Advance EIC payment			10 Dependent care benefits			
2754534						100			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
		2	08			8857			
Monica Miller			13 Statutory Retirement Third-party employee plan sick pay			12b			
6191 Foley Valleys			plan sick pay			625			
North Anitatown PA 76970-3124			14 Other (see enclosed Notice to Employee)			12c			
						969			
						120			
					D	619			
f Employee's address and ZIP code	1.= 2			[T		
15 State Employer's state ID number 16 State wages, tips, etc.	17 State income tax		3 Local wages, tips, etc.		ocal income to		20 Locality name		
AL 261-09-719 68966.4	5865.55	1	118667.49 2		28833.06		Laura Well		
AR 258-13-039 80934.5	5505.92	1	83129.85	26	126.46	;	Jacob Prairie		
Wage and Tax Department of the TreasuryInternal Revenue S									

Wage and Tax

Statement Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return 5070

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

R	EISSUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required						
ST	ATEMENT	57	77-04-5408	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 identification number				1 Wages, tips, other compensation			2 Federal income tax withheld				
26-6501092				149689.65			40536.52				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Marks-West Inc				188828.99			14445.42				
9928 Tyler Garden				5 Medicare wages and tips			6 Medicare tax withheld				
West Jamesview RI 45122-9624			144355.26			4186.3					
			7 Social security tips			8 Allocated tips					
				188828.99			144355.26				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
2754534						100					
e Employ	e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Monica Miller 6191 Foley Valleys North Anitatown PA 76970-3124			208 13 Statutory Retirement Third-party			8857					
			emplo			120	625				
			14 Other (see enclosed Notice to Employee)			12c					
						969					
						12d					
						D	D 619				
	ee's address and ZIP coo		T -	1						ı	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality	
AL	261-09	9-719	68966.4	5865.55		118667.49	28	833.06		Laura	Well
AR	258-13	3-039	80934.5	5505.92		183129.85	26	126.46		Jacob P	rairie

Wage and Tax

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



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

