REIS	EISSUED a Employee's social security number			Safe, Accurate,				20	Visit the IRS Website				
STAT	EMENT	37	8-55-3545	OMB N	o. 1545-(8000	FAST! Us	se "	G	file	at www.	irs.gov/efile.	
b Employer ide	b Employer identification number					1 Wages, tips, other compensation				Federal income tax withheld			
04-9111176					85929.85					23747.1			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Burns and Sons Inc					78467.45					6002.76			
00055 Richards Harbors Apt. 411					5 Medicare wages and tips					6 Medicare tax withheld			
Mic	Michaelmouth RI 78207-0186					90189.63				2615.5			
	MICHAEIMOUCH KI /020/ 0100					7 Social security tips				8 Allocated tips			
					78467.45 9 Advance EIC payment					90189.63 10 Dependent care benefits			
d Control number				9	Advance EI	C payment		1	0 Бере		penetits		
3712520				11 Nonqualified plans					296				
e Employee's f	first name and initial	Last name			11	Nonqualifie	d plans		1	2a See	instructions	for box 12	
D	Ronald Ball				289				P 8024				
ROI					13 Statutory Retirement Third-party employee plan sick pay				1	2b	i		
828 Goodwin Ridges Suite 390						x				D 707			
Juanview KY 06182-4505					14 Other (see enclosed Notice to Employee)				ee) 1	2c	ı		
										P	257		
									1	12d			
											174		
	address and ZIP code	Э									1		
15 State En	mployer's state ID nur	mber	16 State wages, tips, etc.	17 State income tax		18 Loca	l wages, tips,	etc.	19 Loc	al income	ax	20 Locality name	
TN	787-29	-400	41385.11	4140.7		87862.16		129	12958.4		Smith Stravenue		
СО	747-32	-015	42405.69	3576.99		8440	0.97		121	88.5		Hernandez Trafficway	

Wage and Tax Statement 5070

Department of the Treasury--Internal Revenue Service

Form W-2 **Statement**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 soci	al 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								
S	TATEMENT	3	78-55-3545	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 Emplo	b Employer identification number					Wages, tips, other compensation				Federal income tax withheld			
04-9111176						85929.85				23747.1			
c Emplo	yer's name, address, and	3 Social security wages				4 Social security tax withheld							
Burns and Sons Inc						78467.45				6002.76			
00055 Richards Harbors Apt. 411					5 Medicare wages and tips				6 Medicare tax withheld				
					90189.63				2615.5				
	Michaelmouth RI 78207-0186					7 Social security tips				8 Allocated tips			
						78467.45				90189.63			
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits				
	3712520								296				
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12			
	Ronald Ball				289 13 Statutory Retirement Third-party				P 8024				
	828 Goodwin Ridges Suite 390 Juanview KY 06182-4505					employee plan sick pay				12b			
						X			D 707				
						14 Other (see enclosed Notice to Employee)				12c			
										257			
										P 257			
										174			
	oyee's address and ZIP co		Tro or in the	Transition in		Tana a a	1.0.				Lag t III		
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		10 ====================================		9 Local income tax			20 Locality name		
TN	787-29	9-400	41385.11	4140.7		87862.16		2958.4			Smith Stravenue		
со	747-32	2-015	42405.69	3576.99		84400.97		.2188.5			Hernandez Trafficway		

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

