R	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website						ite		
ST	TATEMENT	74	10-17-8061	OMB N	o. 1545-	0008 FAST! U	se 🔍	5~ III	le)	at www.ii	rs.gov/efile	٠.	
b Employer identification number					1 Wages, tips, other compensation				2 Federal income tax withheld				
56-5974840						220472.0			32895.66				
c Employ	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Watson, Love and Gray Inc					262346.79			2	20069.53				
69890 Murphy Forge Apt. 831					5 Medicare wages and tips				6 Medicare tax withheld				
					193844.16				5621.48				
West Nina TX 09502-7252					7 Social security tips			8	8 Allocated tips				
					262346.79				193844.16				
d Control number					9 Advance EIC payment			10	10 Dependent care benefits				
9212875									122				
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12					
Michelle Gilbert 50481 Bruce Green North Jenna UT 04803-4923					267				D 2982				
					13 Statutory Retirement Third-party employee plan Sick pay 14 Other (see enclosed Notice to Employee)								
										788			
									12c				
									420				
										12d			
									_	471			
									P	471			
f Employ 15 State	yee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips	etc	19 Local inc	nme tax		20 Locality	name	
NY	243-04		102936.76	9423.94		9			3292.24		1		
TA T	243-04		102330.70	3423.34		202119.45	<u>'</u>	33232	. 44		Martha	Summit	
KY	261-25	-656	114119.7	6978.45		187885.22	:	35404	.79		Jesse	Port	

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	7.	40-17-8061	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Emplo	b Employer identification number					Wages, tips, other compensation	Federal income tax withheld					
56-5974840					220472.0			32895.66				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Watson, Love and Gray Inc 69890 Murphy Forge Apt. 831						262346.79	20069.53					
					5	Medicare wages and tips	6 Medicare tax withheld 5621.48					
						193844.16						
	West Nina TX 09502-7252					Social security tips	8 Allocated tips					
					262346.79			193844.16				
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	9212875								122			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Michelle Gilbert					267			D 2982				
	50481 Bruce Green					13 Statutory Retirement Third-party employee plan sick pay			I			
									788			
North Jenna UT 04803-4923					14 Other (see enclosed Notice to Employee)			12c				
	North Jenna of 04003 4323							420				
								12d	i			
									P 471			
f Employee's address and ZIP code						Trans.	1			Loo I II		
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax	· · · · · · · · · · · · · · · · · ·			,				
NY	243-04	1-803	102936.76	9423.94		282779.45	33	292.24		Martha Summit		
KY	261-25	5-656	114119.7	6978.45	187885.22 35		404.79		Jesse Port			

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

