F	REISSUED	a Employee's socia	l security number			Saf	e, Accurate,	ee 🖸	J.€H		Visit the	IRS Website	
S	TATEMENT	06	52-24-9855	OMB N	o. 1545-(0008 FAS	T! Use	J	7 111	e	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld				
75-9969748						234214.12			30947.47				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld					
Brooks Inc Inc					190619.4			14582.38					
1866 Orr Avenue Apt. 313					5 Medicare wages and tips				6 Medicare tax withheld				
	Thomasfurt HI 88577-6444					165431.94				4797.53			
						7 Social security tips				8 Allocated tips			
					190619.4				165431.94				
d Control number					9	9 Advance EIC payment 10 Dependent care bene				enefits			
	8106070								226				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
Mackenzie Carney					265 13 Statutory Retirement Third-party				5942				
					employee plan sick pay				12b	I			
8238 Lisa Ports Apt. 124 New James NY 09311-4702					14 Other (see enclosed Notice to Employee)				91				
								yee)	12c				
								885					
									12d				
										н	930		
f Emplo	yee's address and ZIP cod	е						İ					
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		19 L	Local income tax			20 Locality name	
DE	763-26	-538	110605.62	11055.95		303329.34 4		43	3102.84			Kelley Drive	
NC	694-75	-959	105992.55	7802.74		301266	. 69	31	687.	13		Michele Key	

Wage and Tax

Form W-2 Statement

5010

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.

R	REISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT	0	62-24-9855	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				
75-9969748					234214.12			30947.47			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Brooks Inc Inc					190619.4			14582.38			
1866 Orr Avenue Apt. 313 Thomasfurt HI 88577-6444				5	Medicare wages and tips	6 Medicare tax withheld					
					165431.94	4797.53					
Thomasfurt HI 88577-6444					7	Social security tips	8 Allocated tips				
					190619.4			165431.94			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
8106070								226			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
	Mackenzie Carney				265			5942			
					13 Statutory Retirement Third-party			12b			
	8238 Lisa Ports Apt. 124 New James NY 09311-4702					employee plan sick pay 14 Other (see enclosed Notice to Employee)			917		
									12c		
					!			885			
								12d	, ,		
								н	н 930		
f Employee's address and ZIP code											
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		Local income tax	20 Locality name		
DE	763-26	5-538	110605.62	11055.95		303329.34 4		13102.84		Kelley Drive	
NC	694-75	5-959	105992.55	7802.74	301266.69 3:		31	.687.13	Michele Key		

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

