REISSUED a Employee's socia	•		Safe, Accurate, Visit the IRS Website				RS Website		
STATEMENT 89	95-73-4310	OMB No	. 1545-0	DOS FAST! Use		Tile >	at www.irs	s.gov/efile.	
b Employer identification number			1 \	Wages, tips, other compens	ation	2 Federal	l income tax	withheld	
90-4650547			85168.7			30778.88			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Matthews PLC and Sons			73524.78			5624.65			
466 Barbara Fort Millsview TN 99430-7069			5 Medicare wages and tips			6 Medicare tax withheld			
			73973.91			2145.24			
			7 Social security tips			8 Allocated tips			
				73524.78			73973		
d Control number			9 Advance EIC payment			10 Dependent care benefits			
1576872							289		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
Christopher White			112			D 8999			
			13 Statutory Retirement Third-party			12b			
522 Bates Cove			employee plan sick pay			D	D 922		
Lake Christopherville AZ 86432-				14 Other (see enclosed Notice to Employee)			12c		
Lake Christopherville AZ 86432-						P	283		
						12d			
							l		
							832		
f Employee's address and ZIP code 15 State Employer's state ID number	AC Chata wares time at	17 State income tax		10 +	140	Local income tax	. 1	20. Lassituassa	
1 .,,	3, , , , , ,			18 Local wages, tips, etc			•	20 Locality name	
MS 803-58-050	46574.97	3336.52		82350.11 1		14316.14		Jones Mountains	
TN 815-21-785	39660.53	4247.28		99341.91		8840.95		Diana Falls	

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.

F	REISSUED	a Employee's socia	•		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						
	TATEMENT	89	95-73-4310	OME	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Emplo	b Employer identification number			1 V	1 Wages, tips, other compensation			Federal income tax withheld			
90-4650547					85168.7			30778.88			
c Employer's name, address, and ZIP code				3 8	3 Social security wages			4 Social security tax withheld			
Matthews PLC and Sons					73524.78			5624.65			
466 Barbara Fort				5 N	5 Medicare wages and tips			6 Medicare tax withheld			
Millsview TN 99430-7069				73973.91			2145.24				
			7 8	7 Social security tips			8 Allocated tips				
					73524.78			73973.91			
d Control number			9 /	9 Advance EIC payment			10 Dependent care benefits				
1576872								289			
e Employee's first name and initial Last name			11 N	11 Nonqualified plans			12a See instructions for box 12				
Christopher White				112			D 8999				
	Chilistophel white			13 Statu empl		rty	12b	1	1		
522 Bates Cove				X X			D 922				
Lake Christopherville AZ 86432-			14 (14 Other (see enclosed Notice to Employee)			1				
							P	283			
						12d					
									832		
	oyee's address and ZIP coo		Lin ou ii ii	T		Lieu i ii ii ii	1.0	<u> </u>			Lag t iii
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income t	ax			9 Local income tax			20 Locality name
MS	803-58	3-050	46574.97	3336.52		82350.11 1		14316.14			Jones Mountains
TN	815-21	L-785	39660.53	4247.28		99341.91		3840.95			Diana Falls

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

