


REISSUED STATEMENT		a Employee's social security number 896-65-5539		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 67-8841878				1 Wages, tips, other compensation 120433.21		2 Federal income tax withheld 38732.9	
c Employer's name, address, and ZIP code Kennedy, Walker and Anderson PLC 88935 Anthony Cape Port Davidside KS 55301-1622				3 Social security wages 107672.06		4 Social security tax withheld 8236.91	
				5 Medicare wages and tips 118278.83		6 Medicare tax withheld 3430.09	
				7 Social security tips 107672.06		8 Allocated tips 118278.83	
d Control number 9741761				9 Advance EIC payment		10 Dependent care benefits 199	
e Employee's first name and initial Last name Greg Contreras 715 Ray Island Port Michael ID 15212-9637				11 Nonqualified plans 264		12a See instructions for box 12 6372	
				13 Statutory employee Retirement plan Third-party sick pay <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b 297	
				14 Other (see enclosed Notice to Employee)		12c P 409	
						12d D 228	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
TN 188-25-199		64496.51		17 State income tax 3162.32		18 Local wages, tips, etc. 127086.37	
AZ 664-23-519		55236.06		2020.78		19 Local income tax 18583.72	
						20 Locality name Smith Flat	
						Shannon Fall	

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

Form W-2
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.

REISSUED STATEMENT		a Employee's social security number 896-65-5539		OMB No. 1545-0008		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 this income is taxable and you fail to report it.	
b Employer identification number 67-8841878				1 Wages, tips, other compensation 120433.21		2 Federal income tax withheld 38732.9	
c Employer's name, address, and ZIP code Kennedy, Walker and Anderson PLC 88935 Anthony Cape Port Davidside KS 55301-1622				3 Social security wages 107672.06		4 Social security tax withheld 8236.91	
				5 Medicare wages and tips 118278.83		6 Medicare tax withheld 3430.09	
				7 Social security tips 107672.06		8 Allocated tips 118278.83	
d Control number 9741761				9 Advance EIC payment		10 Dependent care benefits 199	
e Employee's first name and initial Last name Greg Contreras 715 Ray Island Port Michael ID 15212-9637				11 Nonqualified plans 264		12a See instructions for box 12 6372	
				13 Statutory employee Retirement plan Third-party sick pay <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b 297	
				14 Other (see enclosed Notice to Employee)		12c P 409	
						12d D 228	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
TN 188-25-199		64496.51		17 State income tax 3162.32		18 Local wages, tips, etc. 127086.37	
AZ 664-23-519		55236.06		2020.78		19 Local income tax 18583.72	
						20 Locality name Smith Flat	
						Shannon Fall	

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

Form W-2
Copy C For EMPLOYEE'S RECORDS.
(See enclosed Notice to Employee.)

Safe, accurate,
FAST! Use

