REISSUED a Employee's social se	•			Safe,	Accurate,	GD 1	H	Visit the	IRS Website	
STATEMENT 526	-64-8626	OMB N	o. 1545-00	008 FAST!	Use	G	file	at www.ii	rs.gov/efile.	
b Employer identification number			1 V	Vages, tips, other c	ompensation		2 Federa	l income tax	withheld	
91-2593290			153057.35				22674.2			
c Employer's name, address, and ZIP code			3 Social security wages				4 Social security tax withheld			
Turner Inc and Sons			186953.52				14301.94			
17949 Smith Expressway Suite 206			5 Medicare wages and tips				6 Medicare tax withheld			
Wendyborough TX 13867-0229			142292.07				4126.47			
wendyborough IX 13667-0229			7 Social security tips				8 Allocated tips			
			186953.52				142292.07			
d Control number			9 Advance EIC payment			1	10 Dependent care benefits			
1036068							180			
e Employee's first name and initial Last name			11 Nonqualified plans			1	12a See instructions for box 12			
Aaron Black			217				D 4594			
			13 Statutory Retirement Third-party employee plan sick pay			1	2b			
12759 Terry Station Apt. 060			Sick pay				н	884		
South Susanchester IA 64062-8			14 Other (see enclosed Notice to Employee)				2c	i		
							н	537		
						1	12d			
							G	658		
f Employee's address and ZIP code										
	State wages, tips, etc.	17 State income tax		18 Local wages,	tips, etc.	19 Loc	al income tax	:	20 Locality name	
KS 211-19-481 8	3688.28	9086.0		146200.4	45	271	08.72		Morgan Pass	
MO 688-30-503 8	0567.99	7630.5		172659.51 25		252	59.21	Kyle Prairie		

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	EISSUED 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						
	AILMEN	26-64-8626	OMB No	UMB No. 1545-0008 this income is taxable and you fail to report it.						
b Employ	er identification number			1 Wages, tips, other compensation			Federal income tax withheld			
91-2593290			153057.35			22674.2				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Turner Inc and Sons			186953.52			14301.94				
17949 Smith Expressway Suite 206 Wendyborough TX 13867-0229			5 Medicare wages and tips			6 Medicare tax withheld				
			142292.07			4126.47				
			7 Social security tips			8 Allocated tips				
			186953.52			142292.07				
d Control	d Control number			9 Advance EIC payment			10 Dependent care benefits			
1036068							180			
e Employ	e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
Aaron Black 12759 Terry Station Apt. 060 South Susanchester IA 64062-8			217 13 Statutory Retirement Third-party sick pay X 14 Other (see enclosed Notice to Employee)			D 4594 12b H 884				
									н	537
						11 33 /				
									G	658
				yee's address and ZIP code						
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income tax	(20 Locality name	
KS	211-19-481	83688.28	9086.0		146200.45	27	108.72		Morgan Pass	
мо	688-30-503	80567.99	7630.5		172659.51 25		259.21	Kyle Prairie		

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

