


REISSUED STATEMENT		a Employee's social security number 522-31-6986		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 54-4384424				1 Wages, tips, other compensation 171119.21		2 Federal income tax withheld 60788.99	
c Employer's name, address, and ZIP code Cruz Inc Ltd 590 Pamela Orchard Apt. 157 East James KY 35598-3671				3 Social security wages 181532.6		4 Social security tax withheld 13887.24	
				5 Medicare wages and tips 214767.1		6 Medicare tax withheld 6228.25	
				7 Social security tips 181532.6		8 Allocated tips 214767.1	
d Control number 8806179				9 Advance EIC payment		10 Dependent care benefits 182	
e Employee's first name and initial Last name Morgan Reyes 688 Garcia Fort Suite 446 East Madeline OH 72246-2645				11 Nonqualified plans 236		12a See instructions for box 12 6250	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b D 534	
				14 Other (see enclosed Notice to Employee)		12c D 615	
						12d 576	
f Employee's address and ZIP code				15 State ID AR		16 State wages, tips, etc. 82948.1	
				17 State income tax 4086.43		18 Local wages, tips, etc. 145365.91	
				19 Local income tax 31576.17		20 Locality name Amy Roads	

**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 522-31-6986		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.	
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**Wage and Tax
Statement**

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

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FAST! Use

