REISSUED a Employee's social security number			Safe, Accurate,	IRSO - G		Visit the IRS Website			
STATEMENT 632-90-8080	OMB N	o. 1545-0008	FAST! Use			at www.irs.gov/efile.			
<b>b</b> Employer identification number	·	1 Wages	, tips, other compensation	2	Federal i	income tax withheld			
24-2058621			99405.75			35112.82			
c Employer's name, address, and ZIP code	•	3 Social	security wages	4	Social se	ecurity tax withheld			
Thomas, Lee and Martin PLC			100677.38			7701.82			
2602 Sonya Course			5 Medicare wages and tips			6 Medicare tax withheld			
Davisport NY 47188-2099			648.41		2512.8				
Davispoit Ri 47100 2099			security tips	8	Allocated	·			
	•		0677.38			86648.41			
d Control number		9 Advan	ce EIC payment	10		ent care benefits			
4998931						144			
e Employee's first name and initial Last name	•	11 Nonqu	alified plans	12a	See inst	tructions for box 12			
			168			P 9885			
Cole Kerr		13 Statutory	Retirement Third-par	ty <b>12b</b>					
242 Curtis Islands Apt. 44	6	employee	plan sick pay			276			
Lake Tracy UT 37502-9428			14 Other (see enclosed Notice to Employee)						
					P	306			
				12d					
						851			
f Employee's address and ZIP code									
15 State Employer's state ID number 16 State wages, tips	s, etc. 17 State income tax	18 1	ocal wages, tips, etc.	19 Local in	come tax	20 Locality name			
MO 417-94-351 48301.87	4892.82	11	5396.29	16328	.32	Tara Row			
GA 211-42-850 54012.96	3664.81	10	8762.18	13014	.43	Jennifer Underpass			

Wage and Tax

5010

Department of the Treasury--Internal Revenue Service

Form W-2 Statement

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	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT	63	32-90-8080	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							
24-2058621				99405.75			35112.82				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Thomas, Lee and Martin PLC				100677.38			7701.82				
2602 Sonya Course Davisport NY 47188-2099				5 Medicare wages and tips 86648.41			6 Medicare tax withheld 2512.8				
											7 Social security tips
				100677.38			86648.41				
				d Control number			9 Advance EIC payment			10 Dependent care benefits	
4998931						144					
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box				for box 12				
Cole Kerr 242 Curtis Islands Apt. 446			168			P 9885					
			13 State	tory Retirement Third-party		12b					
			employee plan sick pay				276				
242 Culcis islands Apc. 440			14 (	Star (and an allowed Nation to English	\	12c	270				
Lake Tracy UT 37502-9428			14	Other (see enclosed Notice to Employe	ee)	120					
			!			P  306					
								12d	ı		
									851		
f Emplo	yee's address and ZIP cod	е									
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income	e tax	20 Locality nar	me
MO	417-94	-351	48301.87	4892.82		115396.29	16	328.3	2	Tara R	low
GA	211-42	-850	54012.96	3664.81		108762.18	13	014.4	.3	Jennifer Unde	erpass

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

