INEIOOOED . ,	cial security number			Safe, Accur	ate,	A Ella	Visit the IRS Website		
STATEMENT 1	.93-67-6836	OMB N	o. 1545-00	DOS FAST! Use		≁file •	at www.irs.gov/efile.		
<b>b</b> Employer identification number			1 \	Wages, tips, other compens	sation	2 Federa	al income tax withheld		
77-0159288				245761.14			63584.13		
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Gibson Ltd PLC			188131.59			14392.07			
22705 Wise Squares Apt. 168 Barnettside OK 74792-9083			5 Medicare wages and tips			6 Medicare tax withheld			
				211201.39		6124.84			
Barnettside Ok /4/92-9005			7 Social security tips			8 Allocated tips			
				188131.59			211201.39		
d Control number			9 /	Advance EIC payment		10 Depen	dent care benefits		
2048901							298		
e Employee's first name and initial Last name	me		11 1	Nonqualified plans		12a See in	structions for box 12		
John Brewer 411 Brewer Station Jamesstad KY 81471-7098			153			E 1581			
			13 Statutory Retirement Third-party sick pay  14 Other (see enclosed Notice to Employee)			12b	1		
							763		
						12c	12c		
							764		
						12d			
						P	156		
f Employee's address and ZIP code							150		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc	c. 19	Local income ta	x 20 Locality name		
NH 612-12-545	114785.4	6433.87		223609.86	37	7122.61	Heidi Mount		
AL 903-06-303	134804.57	7168.92		267582.29	32	2441.88	Wilcox Path		

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 soc	ial security number		This information is being furnished to the Internal Revenue Service. If you are required						
ST	ATEMENT 1	93-67-6836	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>b</b> Employ	ver identification number		<u> </u>	1	Wages, tips, other compensation		2 Federa	l income ta:	x withheld	
77-0159288				245761.14			63584.13			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Gibson Ltd PLC				188131.59			14392.07			
22705 Wise Squares Apt. 168			5 Medicare wages and tips			6 Medicare tax withheld				
Barnettside OK 74792-9083			211201.39 7 Social security tips			6124 . 84 8 Allocated tips				
<b>d</b> Contro	Inumber			9	Advance EIC payment		10 Depend	dent care b	enefits	
2	2048901							298		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
			153			E 1581				
	John Brewer			13 Statutory Retirement Third-party			12b			
411 Brewer Station			employee plan sick pay			763				
			14	Other (see enclosed Notice to Emplo	vee)	12c				
Jamesstad KY 81471-7098					Strict (See Cholosed House to Emplo	,00,	120	l _		
								764		
							12d	1		
							P	156		
f Employ	ee'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	Local income tax	(	20 Locality name	
NH	612-12-545	114785.4	6433.87		223609.86	37	122.61		Heidi Mount	
AL	903-06-303	134804.57	7168.92		267582.29	32	441.88		Wilcox Path	

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

