REI	ISSUED	a Employee's socia	•			Safe, A	ccurate,	20.0	A SHIP		IRS Website	
STA	TEMENT	73	34-91-0144	OMB N	lo. 1545-0	008 FAST!	Use	U	≁file	at www.	irs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld			
50-2213413						45861.94			11238.61			
c Employer's name, address, and ZIP code					3	3 Social security wages			4 Social security tax withheld			
Johnson-Gutierrez and Sons						41663.19			3187.23			
67487 Johnny Mills Suite 987						5 Medicare wages and tips			6 Medicare tax withheld			
Cookebury DE 31903-8303					37228.48				1079.63			
COOKEDUTY DE 31903-6303					7	7 Social security tips			8 Allocated tips			
						41663.19			37228.48			
d Control number					9	9 Advance EIC payment 10 Dependent care ben				enefits		
9723980									224			
e Employee's first name and initial Last name					11	11 Nonqualified plans			12a See instructions for box 12			
т.	Laurie Ross 83956 Kelly Plaza					175			9982			
ь						13 Statutory Retirement Third-party employee plan sick pay				ı		
83										527		
Johnsonfurt ID 30507-4224					14 Other (see enclosed Notice to Employee)				12c			
									D	D 707		
									12d			
									Н	878		
f Employee'	's address and ZIP code	9						İ		I.		
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 1		19 L	Local incom	e tax	20 Locality name	
PA	969-46	-332	24458.75	1260.21		54148.7 5		55	66.25	,) 	Elizabeth Plaza	
HI	977-72	-249	22338.75	1014.84		53844.24 55		52	74.07	ı	George Trail	

Wage and Tax
Form W-2 Statement

5070

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.

REIS	SUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required						
STATE	EMENT	73	34-91-0144	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			
50-2213413					45861.94			11238.61			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Johnson-Gutierrez and Sons					41663.19			3187.23			
67487 Johnny Mills Suite 987 Cookebury DE 31903-8303					5 N	Medicare wages and tips	6 Medicare tax withheld 1079.63				
						37228.48					
					7 8	Social security tips	8 Allocated tips				
					41663.19			37228.48			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
9723980								224			
e Employee's fi	e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Laı	Laurie Ross				175 13 Statutory Retirement Third-party			9982			
					employee plan sick pay						
839	83956 Kelly Plaza				Х	X		P	527		
Johnsonfurt ID 30507-4224					14 (Other (see enclosed Notice to Emplo	12c				
								D	707		
								12d			
						!			878		
f Employee's address and ZIP code							н 878				
	imployer's state ID number 16 State wages, tips, etc. 17 State income tax		18 Local wages, tips, etc. 19		19	Local income tax	20 Locality name				
PA	969-46	5-332	24458.75	1260.21		54148.7		5566.25		Elizabeth Plaza	
							1				
HI	977-72	2-249	22338.75	1014.84		53844.24	52	74.07		George Trail	

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

