F	REISSUED a Employee's social security number				Safe, Accurate,				HIO	Visit the	IRS Website		
S	TATEMENT	12	21-47-5788	OMB N	o. 1545-0	008 FAST!	Use	G	file	at www.i	irs.gov/efile.		
b Emplo	b Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld				
39-5894982					44288.87				12541.48				
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Jackson, Brown and Evans Ltd					39080.06				2989.62				
70138 Sarah Circle					5 Medicare wages and tips				6 Medicare tax withheld				
					44229.67				1282.66				
	Mendezbury ND 40596-9584					7 Social security tips				8 Allocated tips			
					39080.06				44229.67				
d Control number					9 Advance EIC payment			10	10 Dependent care benefits				
3399932									296				
e Employee's first name and initial Last name				11 Nonqualified plans			12	12a See instructions for box 12					
					198				н 5397				
Leonard Robinson				13 Statutory Retirement Third-party employee plan Sick pay 14 Other (see enclosed Notice to Employee)				2b	1				
049 Webb Circle Apt. 087 Lake Amy RI 93813-1018								D	105				
								2c	ı				
										775			
								12	12d				
									н	433			
f Emplo	ovee's address and ZIP code	e								1-00			
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, t	ips, etc.	19 Loca	al income ta	х	20 Locality name		
MA	694-71	-012	21984.13	2791.69		48204.81 4		4826	4826.02		Donald Heights		
MA	633-87	-016	23626.37	1958.86		50117.69)	8824	1.79		Barnes Forges		

Wage and Tax Statement

5070

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.

F	REISSUED	a Employee's soci	•		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							
S	TATEMENT	12	21-47-5788	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Emplo	yer identification number				1 Wages, tips, other compensation			Federal income tax withheld				
39-5894982					44288.87			12541.48				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Jackson, Brown and Evans Ltd						39080.06	2989.62					
70138 Sarah Circle				5	Medicare wages and tips	6 Medicare tax withheld 1282.66						
Mendezbury ND 40596-9584										44229.67		
					7	Social security tips	8 Allocated tips					
						39080.06	44229.67					
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	3399932								296			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
					198			н 5397				
	Leonard Robinson 049 Webb Circle Apt. 087					utory Retirement Third-party	12b					
						employee plan sick pay			105			
Lake Amy RI 93813-1018					14 Other (see enclosed Notice to Employee)			12c				
	Hake Amy KI 93013 1010							775				
									12d			
									н 433			
f Employee's address and ZIP code										,		
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		10 2000 magaz, apa, com		Local income to	ax	20 Locality name		
MA	694-71	L-012	21984.13	2791.69		48204.81		4826.02		Donald Heights		
MA	633-87	633-87-016 23626.37 1958.86		50117.69			24.79		Barnes Forges			

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

