REISSUED a Employee's socia	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website			
STATEMENT 61	L0-27-6592	OMB No	o. 1545-00	08 <b>FAS</b>	ST! Use	<b>U</b>	file .	at www.i	rs.gov/efile.		
<b>b</b> Employer identification number		•	1 Wages, tips, other compensation				2 Federal income tax withheld				
84-4575129				86259.77				29047.98			
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld			
Johnson-Barry and Sons				109647.41				8388.03			
0770 Melissa Manor Suite 764				5 Medicare wages and tips				6 Medicare tax withheld			
North Kelsey OK 64268-6137				62816.18				1821.67			
North Reisey OR 04200-0137				7 Social security tips				8 Allocated tips			
	109647.41				62816.18						
d Control number				9 Advance EIC payment			10 Dependent care benefits				
4009273				I			152				
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12				
Nicole Khan			126				P 4063				
			13 Statutory Retirement Third-party employee plan sick pay				12b				
31870 Shelby Knoll Suite 471				X	X			667			
Ronaldside CO 31545-1156			14 Other (see enclosed Notice to Employee)				12c				
							H	451			
							12d				
							P	867			
f Employee's address and ZIP code											
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wage			cal income to		20 Locality name		
UT 057-49-426	44031.14	2246.71		94329.	98	124	110.83		Hamilton Lock		
MA 208-19-333	42289.68	2364.95		68194.	68	106	531.68		Fields Oval		

Wage and Tax

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 socia	I security number		This information is being furnished to the Internal Revenue Service. If you are required							
S	<b>TATEMENT</b>	61	.0-27-6592	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> Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld				
84-4575129					86259.77				29047.98			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Johnson-Barry and Sons					109647.41				8388.03			
0770 Melissa Manor Suite 764 North Kelsey OK 64268-6137				5 Medicare wages and tips				6 Medicare tax withheld				
				62816.18				1821.67				
				7 Social security tips				8 Allocated tips				
					109647.41				62816.18			
d Control number				9 Advance EIC payment				10 Dependent care benefits				
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e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12					
Nicole Khan			126  13 Statutory Retirement Third-party employee plan sick pay				P 4063					
31870 Shelby Knoll Suite 471			- Citipa	X	X			667				
Ronaldside CO 31545-1156			14 Other (see enclosed Notice to Employee)			ee)	12c					
								н	451			
								12d				
								P	P 867			
	yee's address and ZIP coo		T -									
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages			cal income ta		20 Locality name	
UT	057-49	9-426	44031.14	2246.71		94329.9	98	124	110.83		Hamilton Lock	
MA	208-19	-333	42289.68	2364.95		68194.6	58	106	31.68		Fields Oval	

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

