REISSUED a Emp	loyee's social security number		Safe, Accurate, Visit the IRS Website							
STATEMENT	153-72-4794	OMB No	. 1545-00	08 FAST! Use		*file	at www.irs.gov/efile.			
<b>b</b> Employer identification number			1 V	ages, tips, other compensation	n	2 Federa	l income tax withheld			
65-0844751			81671.46			26972.0				
c Employer's name, address, and ZIP code				ocial security wages		4 Social security tax withheld				
Griffin, Lane and Lynn LLC				88307.43		6755.52				
6864 Patty Rapids Apt. 625			5 Medicare wages and tips			6 Medicare tax withheld				
Seanview NM 05114-7457				81803.37		2372.3				
Deanview Mi Volla /45/			7 Social security tips			8 Allocated tips				
d Control number				88307.43			81803.37			
			9 Advance EIC payment 10 Dependent care benefits				150			
1554616			11 Nonqualified plans			== -				
e Employee's first name and initial	Last name		11 N	onqualified plans		12a See ins	structions for box 12			
Gary Morgan			224			н 5284				
			13 Statutory Retirement Third-party employee plan sick pay			12b	i			
64383 Alyssa Divide			Ompic	X	]		435			
Martinland SC 08662-2783			14 Other (see enclosed Notice to Employee)			12c	ı			
						P	724			
						12d				
							715			
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 wages, tips, etc.	19	Local income tax	20 Locality name			
IN 715-30-603	38061.53	4002.08		80403.95	14	1125.0	Jose Viaduct			
NY 407-45-162	42165.08	3128.26		73113.06	12	2170.85	Anderson Keys			

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 socia	•		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	15	53-72-4794	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.															
<b>b</b> Emplo	b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld												
	65-0844751				81671.46			26972.0												
c Emplo	c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld												
Griffin, Lane and Lynn LLC				88307.43			6755.52													
6864 Patty Rapids Apt. 625 Seanview NM 05114-7457			5 Medicare wages and tips 81803.37 7 Social security tips			6 Medicare tax withheld 2372.3 8 Allocated tips														
														88307.43			81803.37			
										d Control number			9 Advance EIC payment			10 Dependent care benefits				
1554616							150													
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12														
			224			н 5284														
	Gary Morgan			13 Statutory Retirement Third-party			12b													
64383 Alyssa Divide			employee plan sick pay				4	35												
Martinland SC 08662-2783			14 Other (see enclosed Notice to Employee)			12c														
	Marchinana Sc 00002 2703								P 7	24										
							12d													
								7	715											
f Emplo 15 State	oyee's address and ZIP co Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10	anal inno	mo tov		20 Locality name									
	• •		9			9			Ť											
IN	715-30	J-6U3	38061.53	4002.08	80403.95 14125.0			Jose Viaduct												
NY	407-4	5-162	42165.08	3128.26		73113.06	12	170.	85		Anderson Keys									

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

