REISSUED a	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Websit					RS Website		
STATEMENT	060-56-3810	OMB N	o. 1545-00	008 FAST! I	Jse 🗬	<b>G</b> ~1L		at www.irs	s.gov/efile.		
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld			
11-3205042				157368.78				36095.25			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Carter-Thomas and Sons				185481.92			14189.37				
060 Rivers Summit				5 Medicare wages and tips			6 Medicare tax withheld				
				142238.75				4124.92			
Vazquezbury DC 00999-7291				7 Social security tips			8 Allocated tips				
				185481.92			142238.75				
d Control number			9 Advance EIC payment			10	10 Dependent care benefits				
7906030							100				
e Employee's first name and initial Last name			11 Nonqualified plans			12a	12a See instructions for box 12				
Jessica Payne			123				G 2501				
			13 Statutory Retirement Third-party			12b					
48320 Porter Crescent Apt. 421				oyee plan	sick pay			331			
West Daniel	14 Other (see enclosed Notice to Employee)			ee) 12c	1						
West Daniel SC 33920-0462						423					
				12d	12d						
							D	101			
f Employee's address and ZIP code											
15 State Employer's state ID numb	per 16 State wages, tips, etc.	17 State income tax		18 Local wages, tip	s, etc.	19 Local in	come tax		20 Locality name		
WY 265-44-	650 83749.5	4453.0		110546.9	3	25190	. 93		Ortiz Mountains		
TN 702-99-	236 78428.06	6367.66		127617.5	1	16869	.53		Jon Knoll		

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 soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	0	60-56-3810	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			Federal income tax withheld				
11-3205042					157368.78			36095.25			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Carter-Thomas and Sons					185481.92			14189.37			
060 Rivers Summit				5 Medicare wages and tips			6 Medicare tax withheld				
			142238.75			4124.92					
Vazquezbury DC 00999-7291				7 Social security tips			8 Allocated tips				
					185481.92			142238.75			
d Control number				9 Advance EIC payment			10 Dependent care benefits				
7906030							100				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Jessica Payne			123			G 2501					
			13 Statutory Retirement Third-party employee plan sick pay			12b	i				
48320 Porter Crescent Apt. 421				emp	plan sick pay			331			
West Daniel SC 33920-0462				14	Other (see enclosed Notice to Employ	ree)	12c	i			
West banier so saye viol						423					
						12d	i				
							D 101				
	yee's address and ZIP co		T -	T		T				1	
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality name	
WY	265-44	1-650	83749.5	4453.0		110546.93	25	190.93		Ortiz Mountains	
TN	702-99	9-236	78428.06	6367.66		127617.51	16	869.53		Jon Knoll	

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

