REISSUED a Employee's socia	•		Safe, Accurate, Visit the IRS Website					IRS Website		
STATEMENT 31	.2-38-9630	OMB No	o. 1545-00	008 FAST! Use	G~I	ile)	at www.i	rs.gov/efile.		
b Employer identification number			1 V	Vages, tips, other compensation	2	Federa	l income tax	withheld		
91-0944423				196086.34			23701.85			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Johnson LLC and Sons				244233.59			18683.87			
754 Margaret Grove				Medicare wages and tips	6					
Adamburgh MN 81133-3536				251825.93		7302.95				
			7 8	Social security tips	8					
				244233.59				25.93		
d Control number			9 A	Advance EIC payment	10	Depen	dent care be	enefits		
5648603							156			
e Employee's first name and initial Last name			11 N	lonqualified plans	12a	See in	structions	for box 12		
Stephen Gonzalez			199			E 3878				
Stephen Gonzale	Z		13 Statu emple		12b		1			
0126 Tate Drive			СПр	X Sick pay		P	972			
Ryanport SC	53398-4890		14	Other (see enclosed Notice to Employ	ree) 12c		l			
						P	808			
					12d		1			
						D	916			
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 i		(20 Locality name		
AK 506-01-708	102315.74	8639.93		170805.23	1995	1.26		Murphy Roads		
SC 217-62-406	88720.7	10894.86		248357.56	2613	5.7		Mckinney Drive		

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.

R	REISSUED	a Employee's soc	cial security number		This information is being furnished to the Internal Revenue Service. If you are required					
SI	TATEMENT	3	12-38-9630	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			
91-0944423				196086.34			23701.85			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Johnson LLC and Sons				244233.59			18683.87			
754 Margaret Grove				5 Medicare wages and tips			6 Medicare tax withheld			
Adamburgh MN 81133-3536			251825.93			7302.95				
			7 Social security tips			8 Allocated tips				
				244233.59			251825.93			
d Contro	ol number				9 ,	Advance EIC payment		10 Depend	ent care be	enefits
	5648603								156	
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Stephen Gonzalez			199			E 3878				
			13 State			12b				
	0126 Tate	Drive			emp	oyee plan sick pay		P	972	
	Ryanport	SC	53398-4890		14	Other (see enclosed Notice to Employe	ee)	12c		
Nyumpore bo 33330 4030							P	808		
							H	12d		
								D	916	
4 F	ovee's address and ZIP coo						-	ט	910	
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Lc	ocal income tax		20 Locality name
AK	506-01	L-708	102315.74	8639.93		170805.23	199	954.26		Murphy Roads
sc	217-62	2-406	88720.7	10894.86		248357.56	261	135.7		Mckinney Drive

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

