REISSUED a Employee's social s	•		Safe, Accurate, Visit the IRS Website								
STATEMENT 075	5-27-1163	OMB No	. 1545-00	08 FAST! Use			at www.	irs.gov/efile.			
<b>b</b> Employer identification number			1 V	Vages, tips, other comper	nsation	<b>2</b> F	ederal income ta	x withheld			
84-5130485				76112.98		11	11050.69				
c Employer's name, address, and ZIP code			<b>3</b> S	ocial security wages		4 8	ocial security tax	withheld			
Alexander, Morales and Smith Ltd				76142.65		5824.91					
8044 Webb Port Apt. 106			5 N	ledicare wages and tips		6 Medicare tax withheld					
Williamsland IA 29380-2309			<b>7</b> S	61717.56			1789.81				
WIIIIAMSIANG IA 29300 2309				ocial security tips		8 Allocated tips					
				76142.65				7.56			
d Control number			9 A	dvance EIC payment		10 D	Dependent care b	enefits			
6066332		_					245				
e Employee's first name and initial Last name			11 N	lonqualified plans		12a S	See instructions	for box 12			
			113				D 8341				
Kim Gilbert			13 Statu		Third-party	12b					
374 Vazquez Lodge S	Suite 247		emplo	pyee plan	sick pay		D 676				
New Carolyn WI 4	8685-7688		14 C	Other (see enclosed Notic	e to Employee	) 12c	1				
30202711 H2 20000 7000		!				G 578					
			!				12d				
							E 853				
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, e	tc. 1	9 Local inco	me tax	20 Locality name			
MA 313-74-661	34277.8	2823.43		74009.86		610.6	7	Jones Glens			
IL 098-69-801	38712.0	2619.77		60294.32	1	.0539.	57	James Groves			

Wage and Tax Statement

Form W-2

5070

Department of the Treasury--Internal Revenue Service

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 soc	al security number		This information is being furnished to the Internal Revenue Service. If you are required									
S	TATEMENT	0	75-27-1163	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					
84-5130485					76112.98					11050.69				
c Employer's name, address, and ZIP code					3 Social security wages					4 Social security tax withheld				
Alexander, Morales and Smith Ltd				76142.65					5824.91					
8044 Webb Port Apt. 106 Williamsland IA 29380-2309			5 Medicare wages and tips					6 Medicare tax withheld						
			61717.56					1789.81						
			7 Social security tips					8 Allocated tips						
			76142.65					61717.56						
<b>d</b> Contro	ol number				9	Advance EIC	payment			10	Depend	dent care be	enefits	
	6066332											245		
e Employee's first name and initial Last name			11 Nonqualified plans					12a See instructions for box 12						
Kim Gilbert			113 D 8341  13 Statutory Retirement Third-party employee plan sick pay											
	374 Vazquez Lodge Suite 247								D 676					
New Carolyn WI 48685-7688			14 Other (see enclosed Notice to Employee)				ree)	12c		1				
								G 578						
									F	12d				
											E	853		
f Employee's address and ZIP code							F			1000				
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local w	ages, tips, e	etc.	19 L	ocal inc	ome tax	(	20 Localit	y name
MA	313-74	1-661	34277.8	2823.43		74009	86.8		96	10.	67		Jones	Glens
IL	098-69	9-801	38712.0	2619.77		60294	1.32		10	539	. 57		James	Groves

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

