3, , , ,	12a See instructions for box 12		
Retirement Third-party sick pay X X X X (see enclosed Notice to Employee)	7921 H 945 E 688 12d G 932		
Retirement Third-party plan sick pay	7921 H 945 E 688		
Retirement Third-party plan sick pay	7921 H 945 12c E 688		
Retirement Third-party plan sick pay	7921 12b H 945		
Retirement Third-party plan sick pay	7921		
Retirement Third-party	7921		
•			
	152		
	10 Dependent care benefits		
· ·	8 Allocated tips 220635.43		
	6398.43		
are wages and tips	6 Medicare tax withheld		
, ,	18956.48		
	62172.84 4 Social security tax withheld		
	2 Federal income tax withheld		
FAST! Use	Visit the IRS Website at www.irs.gov/efile.		
	Safe, Accurate, FAST! Use s, tips, other compensation L0325.45 security wages 17797.13 are wages and tips 20635.43 security tips 17797.13 are EIC payment		

Wage and Tax

Form W-2 Statement

5010

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.

REISSUED	a Employee's social securi	ty number			This information is being fur						
STATEMENT	399-6	0-1133	OMB No	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				
27-5426623				210325.45			62172.84				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Black LLC Ltd				247797.13			18956.48				
513 Aaron Bypass Apt. 233				5 Medicare wages and tips 220635.43			6 Medicare tax withheld 6398.43				
										Sherrystad MD 02652-4962	
				247797.13			220635.43				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
4568872								152			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Christopher Gonzales 9654 Megan Views Suite 308				249 13 Statutory Retirement Third-party sick pay X X X X			7921 H 945				
										Roseland AR 76570-1170	
						1	E 688				
							12d				
4. Eurolausele address and 7ID and								G 932			
f Employee's address and ZIP of 15 State Employer's state ID		ate wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19	Local incor	ne tax	20 Locality name		
' '		342.78	8206.88		156177.25		1365.		Davidson Motorwa		
MN 291-6	7-383 990	29.24	8822.96		269280.06	35	5278.	57	Osborne Square		

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

