F	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website			
S	TATEMENT	16	66-23-7778	OMB N	o. 1545-000	8 FAST! Use		*file	at www.i	rs.gov/efile.		
b Employer identification number					1 Wa	 Wages, tips, other compensation 			Federal income tax withheld			
	47-9360329					41794.61			10809.21			
c Emplo	yer's name, address, and Z	IP code			3 So	3 Social security wages			4 Social security tax withheld			
Harris Inc Ltd					44272.36			3386.84				
572 Eric Island					5 Medicare wages and tips			6 Medica				
					35387.86			1026.25				
	West Joshua	HI	25778-1971		7 Social security tips			8 Allocated tips				
					44272.36			35387.86				
d Control number					9 Advance EIC payment			10 Dependent care benefits				
416410									111			
e Emplo	byee's first name and initial	Last name	9		11 Nonqualified plans			12a See instructions for box 12				
					245			5139				
	Kathleen	Erickso	n		13 Statutory Retirement Third-party			12b				
52799 Moran Mountains Apt. 017				X				823				
	Erinshire SD 85456-6785				14 Other (see enclosed Notice to Employee)			12c	ı			
									222			
									12d			
									555			
f Emplo	oyee's address and ZIP code	a							333			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	' 	18 Local wages, tips, etc.	. 19	Local income tax	(20 Locality name		
MS	120-88	-137	20953.64	1248.38		53128.72	4	768.77		Karina Gateway		
СО	843-58	-975	20111.09	1812.63		51265.76		331.26		Wallace Cliff		
				5 5 5						J		
Wage and Tax					Department of the TreasuryInternal Revenue Service							
Form W-	. Statem	ent			u							

Statement Form W-2 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	al security number	This information is being furnished to the Internal Revenue Service. If you are required								
S	TATEMENT	16	66-23-7778	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 Emplo	b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld			
47-9360329						41794.61			10809.21			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Harris Inc Ltd 572 Eric Island					44272.36			3386.84				
					5 Medicare wages and tips			6 Medicare tax withheld				
					35387.86			1026.25				
	West Joshua HI 25778-1971					7 Social security tips			8 Allocated tips			
					44272.36			35387.86				
d Control number						9 Advance EIC payment			10 Dependent care benefits			
	416410								111			
e Emplo	yee's first name and initial	Last name	9		11 Nonqualified plans			12a See instructions for box 12				
Kathleen Erickson				245			5139					
	52799 Moran Mountains Apt. 017					13 Statutory Retirement Third-party employee plan sick pay			G 823			
	Erinshire SD 85456-6785				14 Other (see enclosed Notice to Employee)			12c				
									P	222		
							ŀ	12d				
								555				
f Employee's address and ZIP code 15 State					I do to o to o to	140	12	come tax		00 1		
15 State	Employer's state ID no		16 State wages, tips, etc.			18 Local wages, tips, etc.				i	20 Locality name	
MS	120-88	3-137	20953.64	1248.38		53128.72	47	68.	11		Karina Gateway	
со	843-58	3-975	20111.09	1812.63		51265.76	63	31.	26		Wallace Cliff	

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

