	REISSUED a Employee's social s		I security number	OMB No		Safe, Accurate,			• file		IRS Website		
b Emplo	FATEMENT yer identification number 11-4835967	, -	.5 17 5255	05		Wages, tips, othe 114492	r compensation			leral income ta	Ü		
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld				
Jenkins-Terry LLC						135740.48			10384.15				
270 Evans Walk					5 Medicare wages and tips				6 Medicare tax withheld				
	West Danielle WA 23509-2602					133821.52 7 Social security tips				3880.82 8 Allocated tips			
Medic Building Mil 23303 2002					<i>,</i> ,				· ·				
d Control number					135740.48			-	133821.52 10 Dependent care benefits				
					9 Advance EIC payment				127				
	7314745 e Employee's first name and initial Last name					11 Nonqualified plans			12 /				
e Emplo	yee's ilist riame and imiliar	Last name			"	Nonqualified plan	5		124 56		IOI DOX 12		
	Q	1			137				3371				
	Craig Coleman					13 Statutory Retirement Third-party employee plan sick pay			12b	ı			
	540 Bradshaw Way North Sean DC 09587-5123				14 Other (see enclosed Notice to Employee)				G	187			
									12c	i			
									E	372			
								-	12d				
										144			
f Emplo	vee's address and ZIP cod	е						F					
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wage	s, tips, etc.	19 L	ocal income	e tax	20 Locality name		
NJ	282-78	-844	58297.61	3011.71		87120.	87120.03		4038.6		Jackson Heights		
DC	235-70	-763	62856.05	4016.4		126871	. 86	13	425.5	1	Christy Turnpike		
				· · · · · · · · · · · · · · · · · · ·									

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.

	REISSUED a Employee's social security number STATEMENT 713-17-9259			OMB N	This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if						
	STATEMENT 713-17-9259 OMB				this income is taxable and you fail to report it. 1 Wages, tips, other compensation 2 Federal income tax withheld					x withheld	
11-4835967					114492.04			13483.38			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld		
Jenkins-Terry LLC					135740.48			10384.15			
270 Evans Walk					5 Medicare wages and tips			6 Medicare tax withheld			
					133821.52			3880.82			
	West Danielle WA 23509-2602					7 Social security tips			8 Allocated tips		
		135740.48			133821.52						
	d Control number					9 Advance EIC payment			10 Dependent care benefits		
	7314745							127			
e Emplo	yee's first name and initial	Last name	9		11 Nonqualified plans			12a See instructions for box 12			
	Quality Quillenan					137			3371		
	Craig Coleman 540 Bradshaw Way North Sean DC 09587-5123				13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			12b	1		
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	North Stair Stair Stair Stair								372		
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								144			
f Employee's address and ZIP code						Transition in the second	1			Tag t III	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax	(20 Locality name	
NJ	282-78	-844	58297.61	3011.71		87120.03	14	1038.6		Jackson Heights	
DC	235-70	-763	62856.05	4016.4		126871.86	13	3425.51		Christy Turnpike	

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

