F	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website		
S	TATEMENT	47	5-94-5745	OMB N	o. 1545-00	08 FAST! Use		≁file •	at www.i	rs.gov/efile.	
b Emplo	oyer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld			
21-1074330						50564.72			14257.65		
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Mack PLC and Sons					43015.5			3290.69			
1073 Irwin Stream					5 N	ledicare wages and tips		6 Medicare tax withheld			
						36511.48		1058.83			
Port Karen RI 78016-9732					7 Social security tips			8 Allocated tips			
					43015.5			36511.48			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
	5972602							182			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
						205			8931		
Eric Gutierrez 513 Craig Pike North Catherine NV 78945-2327					13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			12b			
									922		
								12c			
								D	D 550		
								120			
								H	344		
	oyee's address and ZIP cod										
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc		Local income ta	х	20 Locality name	
HI	399-84	-435	23620.79	1339.09		51810.24	92	267.86		Jessica Via	
IL	185-65	-791	23556.51	1237.78		51575.52	80	047.4		Strong Ramp	

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 socia	l security number							ice. If you are required		
STATEMENT	STATEMENT 475-94-5745			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 V	ages, tips, other compe	nsation	2 Federa	al income tax	withheld		
21-1074330					50564.72			14257.65			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Mack PLC ar		43015.5			3290.69						
1073 Irwin	5 N	5 Medicare wages and tips			6 Medicare tax withheld						
5		36511.48			1058.83						
Port Karen	7 S	7 Social security tips			8 Allocated tips						
					43015.5			36511.48			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
5972602								182			
e Employee's first name and initial	Last name			11 N	11 Nonqualified plans			12a See instructions for box 12			
						205			8931		
Eric (Sutierrez	l			13 Statutory Retirement Third-party			12b			
513 Craig Pike North Catherine NV 78945-2327					mployee plan sick pay 14 Other (see enclosed Notice to Employee)			922			
								12c			
								550			
								D 550			
								1_			
							Н	344			
f Employee's address and ZIP cod											
15 State Employer's state ID no		16 State wages, tips, etc.	17 State income t	tax	18 Local wages, tips, e		Local income ta	x	20 Locality name		
HI 399-84	1-435	23620.79	1339.09		51810.24	9	267.86		Jessica Via		
IL 185-65	5-791	23556.51	1237.78		51575.52	8	047.4		Strong Ramp		

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

