REISSUED a Employee's soci	al security number			Safe, Accı	irate,			isit the IF	RS Website
STATEMENT 6	17-73-7606	OMB No	o. 1545-00	008 FAST! Us	e		G at	t www.irs	s.gov/efile.
<b>b</b> Employer identification number			1 V	Vages, tips, other compe	nsation	2	Federal in	come tax v	withheld
37-9583450				107244.17		3:	3859	. 33	
c Employer's name, address, and ZIP code			3 8	Social security wages		4	Social sec	curity tax w	ithheld
Sims-Barnes Ltd				81121.98		6:	205.8	83	
888 Villarreal Drive	Apt. 903		5 N	Medicare wages and tips		6		tax withhel	
Brownfurt ID	49422-6563		7 9	132948.42 Social security tips		8	ک Allocated 1	3855.	5
			1 3	81121.98					8.42
d Control number			9 /	Advance EIC payment		10		nt care ben	
4574809							•	L85	
e Employee's first name and initial Last nam	е		11 N	Nonqualified plans		12a	See instru	uctions fo	or box 12
m: cc			242				E 4259		
Tiffany Ramos			13 Statu empl		Third-party sick pay	12b	·		
0345 Rebecca Ramp	Suite 118		- Cinpi		<u>Jok pa</u>		P 6	95	
Port Norma RI	56746-3859		14 (	Other (see enclosed Notice	ce to Employee	e) <b>12c</b>	i		
							E 5	598	
						12d	i		
							P 2	203	
f Employee's address and ZIP code	T -			1					
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, e		19 Local inco			20 Locality name
OK 664-09-109	54800.71	4977.15		117432.55		11010.	. 2		Kenneth Junction
IN 585-97-352	55016.07	5023.04		94687.0	:	13033.	. 66	ı	John Islands

Wage and Tax Statement

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 soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
STATEMENT	6:	17-73-7606	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>b</b> Employer identification number	mployer identification number			1 Wages, tips, other compensation			2 Federal income tax withheld				
37-9583450			107244.17			33859.33					
c Employer's name, address, and	d ZIP code			3	Social security wages		4 Social s	security tax	withheld		
Sims-Barne	s Ltd				81121.98		6205	.83			
888 Villarreal Drive Apt. 903			5 Medicare wages and tips			6 Medicare tax withheld					
-				132948.42			3855.5				
Brownfurt	ID	49422-6563			7 Social security tips			8 Allocated tips			
					81121.98			1329	48.42		
d Control number				9	Advance EIC payment		10 Depend	dent care b	enefits		
4574809							185				
e Employee's first name and initia	al Last nam	е		11	Nonqualified plans		12a See in:	structions	for box 12		
m: cc	_				242		E	4259			
Tiffany	Ramos			13 Stat			12b				
0345 Rebe	cca Ramp	Suite 118		emp	loyee plan sick pay		P	695			
Port Norm	a RI	56746-3859		14	Other (see enclosed Notice to Employ	yee)	12c	ı			
							E	598			
							12d				
							P	203			
f Employee's address and ZIP or	nde						-				
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19	Local income tax	(	20 Locality name		
OK 664-0	9-109	54800.71	4977.15		117432.55	11	010.2		Kenneth Junction		
IN 585-9	7-352	55016.07	5023.04		94687.0	13	033.66		John Islands		

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

