


REISSUED STATEMENT		a Employee's social security number 363-21-0017		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 36-9293681				1 Wages, tips, other compensation 243336.67		2 Federal income tax withheld 44537.07	
c Employer's name, address, and ZIP code Johnson LLC PLC 937 Adkins Underpass Apt. 918 North Amymouth RI 39731-6265				3 Social security wages 264983.46		4 Social security tax withheld 20271.23	
				5 Medicare wages and tips 292656.97		6 Medicare tax withheld 8487.05	
				7 Social security tips 264983.46		8 Allocated tips 292656.97	
d Control number 5789946				9 Advance EIC payment		10 Dependent care benefits 184	
e Employee's first name and initial Last name Jason Carey 450 Kimberly Plaza Suite 345 Samanthashire OK 99243-3689				11 Nonqualified plans 136		12a See instructions for box 12 9925	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b H 494	
				14 Other (see enclosed Notice to Employee)		12c P 662	
						12d G 181	
f Employee's address and ZIP code				15 State		20 Locality name	
Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
TN 784-72-668		122561.04		8700.51		299575.41	
MO 049-14-746		113453.11		6146.21		255922.13	
						31094.58	
						33591.58	
						Ward Courts	
						Thompson Expressway	

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

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.

REISSUED STATEMENT		a Employee's social security number 363-21-0017		OMB No. 1545-0008		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 this income is taxable and you fail to report it.	
b Employer identification number 36-9293681				1 Wages, tips, other compensation 243336.67		2 Federal income tax withheld 44537.07	
c Employer's name, address, and ZIP code Johnson LLC PLC 937 Adkins Underpass Apt. 918 North Amymouth RI 39731-6265				3 Social security wages 264983.46		4 Social security tax withheld 20271.23	
				5 Medicare wages and tips 292656.97		6 Medicare tax withheld 8487.05	
				7 Social security tips 264983.46		8 Allocated tips 292656.97	
d Control number 5789946				9 Advance EIC payment		10 Dependent care benefits 184	
e Employee's first name and initial Last name Jason Carey 450 Kimberly Plaza Suite 345 Samanthashire OK 99243-3689				11 Nonqualified plans 136		12a See instructions for box 12 9925	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b H 494	
				14 Other (see enclosed Notice to Employee)		12c P 662	
						12d G 181	
f Employee's address and ZIP code				15 State		20 Locality name	
Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
TN 784-72-668		122561.04		8700.51		299575.41	
MO 049-14-746		113453.11		6146.21		255922.13	
						31094.58	
						33591.58	
						Ward Courts	
						Thompson Expressway	

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

Form W-2
Copy C For EMPLOYEE'S RECORDS.
(See enclosed Notice to Employee.)

Safe, accurate,
FAST! Use

