REISSUED a Employee's social security number \$7.475MENT 421-67-0021	OMB No. 1545-0	Safe, Accurate,	*e~file	Visit the IRS Website at www.irs.gov/efile.			
STATEMENT				ŭ			
b Employer identification number	1	Wages, tips, other compensation		Federal income tax withheld			
11-0212084		185094.18	6306	63062.15			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social	4 Social security tax withheld			
Lane Inc and Sons		175352.57		13414.47			
65714 Michael Locks Apt. 610	5	Medicare wages and tips	6 Medica				
North Alexander NV 76455-2704		207936.0		6030.14			
NOICH ATEXANGEL NV /0455-2704	7	Social security tips	8 Allocat	8 Allocated tips			
		175352.57		207936.0			
d Control number		Advance EIC payment	10 Depen	10 Dependent care benefits			
8766272				102			
e Employee's first name and initial Last name		Nonqualified plans	12a See in	12a See instructions for box 12			
John Hill		220		9414			
JOHN HIII	13 State	utory Retirement Third-party loyee plan sick pay	12b	1			
67884 Sanders Springs Apt. 855	епр	loyee plan Sick pay	G	684			
Tiffanyside RI 86595-0049	14	Other (see enclosed Notice to Employ	yee) 12c	i			
112 00000 0010			P	403			
			12d	1			
			D	418			
f Employee's address and ZIP code							
15 State Employer's state ID number 16 State wages, tips, etc. 17 State	ate income tax	18 Local wages, tips, etc.	19 Local income ta	x 20 Locality name			
MI 671-33-895 95423.64 502	1.68	162445.12	18821.61	Johnson Flats			
KS 660-58-756 98207.89 665	2.44	185327.94	26585.44	Tina Stravenue			

Wage and Tax

Form W-2 **Statement**Copy B--To Be Filed with Employee's FEDERAL Tax Return

5070

Department of the Treasury--Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

	EISSUED a Emp	loyee's social security number 421-67-0021	OMB N	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.							
	ver identification number			1 Wages, tips, other compensation			2 Federal income tax withheld				
11-0212084			185094.18			63062.15					
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Lane Inc and Sons			175352.57			13414.47					
65714 Michael Locks Apt. 610 North Alexander NV 76455-2704			5 Medicare wages and tips			6 Medicare tax withheld					
			207936.0			6030.14					
			7 Social security tips			8 Allocated tips					
			175352.57			207936.0					
d Control number			9 Advance EIC payment			10 Dependent care benefits					
8766272						102					
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12						
John Hill 67884 Sanders Springs Apt. 855			220 13 Statutory Retirement Third-party employee plan Sick pay 14 Other (see enclosed Notice to Employee)			9414 G 684					
						12c					
Tiffanyside RI 86595-0049		' `	outer (acc enclosed Notice to Employ	00)							
					P	= = = = =					
							12d	i			
							D	418			
f Employ	ee's address and ZIP code										
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19	Local income tax		20 Locality name		
MI	671-33-89	95423.64	5021.68		162445.12	18	821.61		Johnson Flats		
KS	660-58-75	6 98207.89	6652.44		185327.94	26	5585.44		Tina Stravenue		

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

