REISSUED a Employee's social security number		Safe, Accurate,		e IRS Website		
STATEMENT 597-65-5049	OMB No. 1545-0008	FAST! Use	at www	.irs.gov/efile.		
b Employer identification number	1 Wage	es, tips, other compensation	2 Federal income t	2 Federal income tax withheld		
36-5429027	5:	1055.64	7018.01	7018.01		
c Employer's name, address, and ZIP code	3 Socia	I security wages	4 Social security ta	4 Social security tax withheld		
Garcia-Gibson Ltd	40	0726.69	3115.59	3115.59		
90448 Douglas Drives Suite 024		care wages and tips				
North Davidburgh NH 92367-5733		5683.13		1614.81		
North Davidburgh NH 92367-3733		I security tips	· ·	8 Allocated tips		
		0726.69		33.13		
d Control number		nce EIC payment	· ·	10 Dependent care benefits		
4918369		159				
e Employee's first name and initial Last name		ualified plans	12a See instructions	12a See instructions for box 12		
		36	G 4320)		
Glenn Keith	13 Statutory	Retirement Third-party	12b			
868 Diana Estates	X	plan sick pay	P 980			
Gillborough KS 84839-6096	14 Other	(see enclosed Notice to Employ	/ee) 12c			
			G 229			
			12d			
			207			
f Employee's address and ZIP code			1207			
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	e income tax 18	Local wages, tips, etc.	19 Local income tax	20 Locality name		
CT 846-06-349 23276.83 236	5.62 3	6995.77	5857.28	Blevins Fork		
IN 901-47-832 27719.27 1750).73 3	7873.18	8880.43	Michael Summit		

Wage and Tax Statement

5010

Department of the Treasury--Internal Revenue Service

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.

R	EISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
ST	ATEMENT	59	97-65-5049	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 Employer identification number				Wages, tips, other compensation			Federal income tax withheld				
36-5429027			51055.64			7018.01					
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Garcia-Gibson Ltd			40726.69			3115.59					
90448 Douglas Drives Suite 024				5 Medicare wages and tips			6 Medicare tax withheld				
_			55683.13			1614.81					
North Davidburgh NH 92367-5733				7 Social security tips			8 Allocated tips				
			40726.69			55683.13					
d Control number			9 Advance EIC payment			10 Dependent care benefits					
4918369						159					
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Glenn Keith			136			G 4320					
			13 Statu			12b		i			
868 Diana Estates			employee plan sick pay				P 980				
Gillborough KS 84839-6096				14 (Other (see enclosed Notice to Employ	ree)	12c		ı		
							G	229			
							-	12d			
							207				
	ee's address and ZIP coo					1					1
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.			come tax		20 Locality name
CT	846-06	5-349	23276.83	2366.62		36995.77	58	57.	28		Blevins Fork
IN	901-47	-832	27719.27	1750.73		37873.18	88	80.	43		Michael Summit

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

