REISSUED a Employee	e's social security number		Safe, Accurate, Visit the IRS Website							
STATEMENT	699-19-5829	OMB N	o. 1545-000	98 FAST! Us	e e	5~ III	at www	v.irs.gov/efile.		
b Employer identification number			1 W	1 Wages, tips, other compensation			2 Federal income tax withheld			
54-1469669				113156.49			12485.66			
c Employer's name, address, and ZIP code			3 Social security wages			4	4 Social security tax withheld			
Morris PLC LLC			85705.01			_	6556.43			
4388 Christopher Light			5 Medicare wages and tips			6				
			100958.8				2927.81			
West Christopherton OK 05638-4580			7 Social security tips			8	8 Allocated tips			
				85705.01			100958.8			
d Control number			9 Advance EIC payment			10	10 Dependent care benefits			
2538912							108			
e Employee's first name and initial Last name			11 Nonqualified plans			12a	12a See instructions for box 12			
Nina Johnson			127				н 5594			
			13 Statutory Retirement Third-party employee plan sick pay			12b	1			
138 Scott Port Apt. 635				yee plan	sick pay		555			
New Edwardside LA 09803-5096				14 Other (see enclosed Notice to Employee)			ı			
New Edwardside Er 05005 5050							E 220			
						12d				
							727			
							737			
f Employee'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, e	etc .	19 Local inc	ome tay	20 Locality name		
KY 009-40-748	61644.75	1921.43		107625.87		22335		,		
	01044.75	1921.43		10/025.67		22333	. 50	Flores Summit		
SD 334-09-320	54564.84	1984.35		120795.69	:	15873	. 51	Thomas Square		

Wage and Tax

Form W-2 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.

	REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT	1	99-19-5829	OMB N	OMP No. 1545 0008 to file a tax return, a negligence penalty or other sanction may be imposed on you if						
	yer identification number	0.	73 13 3023		this income is taxable and you fail to report it. 1 Wages, tips, other compensation 2 Federal income tax withheld						withheld
	54-1469669				113156.49			12485.66			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Morris PLC LLC			85705.01			6556.43					
4388 Christopher Light			5 Medicare wages and tips			6 Medicare tax withheld					
West Christopherton OK 05638-4580				100958.8			2927.81				
				7 Social security tips			8 Allocated tips				
				85705.01			100958.8				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
2538912						108					
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Nina Johnson			127			н 5594					
			13 Sta			12b		3374			
			employee plan sick pay								
138 Scott Port Apt. 635			Х	<u> </u>				555			
New Edwardside LA 09803-5096			14	Other (see enclosed Notice to Employe	ee)	12c	1				
							E	220			
					F	12d					
							ĺ				
						737					
	yee's address and ZIP coo										
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal inco	ome tax		20 Locality name
KY	009-40	748	61644.75	1921.43		107625.87	22	335.	. 36		Flores Summit
SD	334-09	9-320	54564.84	1984.35		120795.69	15	873.	. 51		Thomas Square

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

