R	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website				
ST	TATEMENT	45	7-50-9546	OMB N	o. 1545-0	0008 FAST! Us	se 🔍	541	le	at www.ir	s.gov/efile	٠.	
b Employ	b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld				
	92-5981669				105726.15				10903.81				
c Employer's name, address, and ZIP code					3 Social security wages			4	4 Social security tax withheld				
Miller, Garcia and Burgess Inc					122392.42			9	9363.02				
6222 Caitlyn Villages					5 Medicare wages and tips				6 Medicare tax withheld				
Duarteside AR 34812-5208				128984.48				3740.55					
				7 Social security tips				8 Allocated tips					
					122392.42				128984.48				
d Control number					9 Advance EIC payment 10 Deper				Depend	ndent care benefits			
	7867028								286				
e Emplo	e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
		_			161				E 9969				
	Sergio Kelley				13 Statutory Retirement Third-party					1			
48451 Robles Parkway					employee plan sick pay				E	280			
	Lake Rachel VT 69158-0424				14 Other (see enclosed Notice to Employee)								
										200			
									389				
								120		I			
									H	220			
	yee's address and ZIP code					_							
15 State	Employer's state ID nur		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips,		19 Local in			20 Locality	name	
WA	793-87	-837	50072.34	3574.77		128191.29		18012	. 47		Wood	Drive	
DE	808-38	-982	51137.3	3103.16		76589.19		11054	. 92		Felicia (Causeway	

Wage and Tax Statement

Form W-2

5070

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.

F	REISSUED	a Employee's socia	•		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							
	STATEMENT 457-50-9546 OMB N				this income is taxable and you fail to report it.							
b Emplo	b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld			
92-5981669					105726.15			10903.81				
c Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Miller, Garcia and Burgess Inc 6222 Caitlyn Villages Duarteside AR 34812-5208					122392.42			9363.02				
					5 1	Medicare wages and tips	6 Medicare tax withheld 3740.55					
						128984.48						
					7 5	Social security tips	8 Allocated tips					
						122392.42	128984.48					
d Control number					9 Advance EIC payment			10 Dependent care benefits				
	7867028								286			
e Emplo	yee's first name and initial	Last name	Э		11 Nonqualified plans			12a See instructions for box 12				
Sergio Kelley					161 13 Statutory Retirement Third-party			E 9969				
	48451 Robles Parkway Lake Rachel VT 69158-0424					employee plan sick pay			280			
						14 Other (see enclosed Notice to Employee)			12c			
						The Care (coe choicea Head to Employee)			1			
								389				
								12d	i			
									220			
f Employee's address and ZIP code							[
15 State	Employer's state ID no	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	Local income ta	•	20 Locality name		
WA	793-87	7-837	50072.34	3574.77		128191.29		.8012.47		Wood Drive		
DE	808-38	8-982	51137.3	3103.16		76589.19	11	054.92		Felicia Causeway		

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

