

b Employer identification number (EIN) 13-4985720		12a See instructions for box 12		1 Wages, tips, other compensation 17585.10		2 Federal income tax withheld 2757.32	
c Employer's name, address, and ZIP code GUY CARPENTER & COMPANY, LLC 1166 AVENUE OF THE AMERICAS NEW YORK NY 10036		12b .D \$ 444.90		3 Social security wages 18030.00		4 Social security tax withheld 1117.86	
		12c .I \$		5 Medicare wages and tips 18030.00		6 Medicare tax withheld 261.44	
		12d .S \$		7 Social security tips		8 Allocated tips	
e Employee's first name and initial Last name Suffix RASUL KIREEV 8G 1660 MADISON AVENUE NEW YORK NY 10029-3118		12e .I \$		9		10 Dependent care benefits	
		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans		13 <input type="checkbox"/> Health <input checked="" type="checkbox"/> Retirement <input type="checkbox"/> Disability	
		Copy B To Be Filed With Employee's FEDERAL Tax Return		14 Other			
f Employee's address and ZIP code IMPORT CODE EH9J9JFQ		a Employee's social security number 868-28-2543					
15 State MA	Employer's state ID number WTH-11798415-003	16 State wages, tips, etc. 3200.00	17 State income tax 25.66	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2016 Department of the Treasury-Internal Revenue Service OMB# 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

b Employer identification number (EIN) 13-4985720		12a See instructions for box 12		1 Wages, tips, other compensation 17585.10		2 Federal income tax withheld 2757.32	
c Employer's name, address, and ZIP code GUY CARPENTER & COMPANY, LLC 1166 AVENUE OF THE AMERICAS NEW YORK NY 10036		12b .D \$ 444.90		3 Social security wages 18030.00		4 Social security tax withheld 1117.86	
		12c .I \$		5 Medicare wages and tips 18030.00		6 Medicare tax withheld 261.44	
		12d .S \$		7 Social security tips		8 Allocated tips	
e Employee's first name and initial Last name Suffix 0001208 RASUL KIREEV 8G 1660 MADISON AVENUE NEW YORK NY 10029-3118		12e .I \$		9		10 Dependent care benefits	
		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans		13 <input type="checkbox"/> Health <input checked="" type="checkbox"/> Retirement <input type="checkbox"/> Disability	
		Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return		14 Other			
f Employee's address and ZIP code IMPORT CODE EH9J9JFQ		a Employee's social security number 868-28-2543					
15 State MA	Employer's state ID number WTH-11798415-003	16 State wages, tips, etc. 3200.00	17 State income tax 25.66	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2016 Department of the Treasury-Internal Revenue Service OMB# 1545-0008 Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

b Employer identification number (EIN) 13-4985720		12a See instructions for box 12		1 Wages, tips, other compensation 17585.10		2 Federal income tax withheld 2757.32	
c Employer's name, address, and ZIP code GUY CARPENTER & COMPANY, LLC 1166 AVENUE OF THE AMERICAS NEW YORK NY 10036		12b .D \$ 444.90		3 Social security wages 18030.00		4 Social security tax withheld 1117.86	
		12c .I \$		5 Medicare wages and tips 18030.00		6 Medicare tax withheld 261.44	
		12d .S \$		7 Social security tips		8 Allocated tips	
e Employee's first name and initial Last name Suffix RASUL KIREEV 8G 1660 MADISON AVENUE NEW YORK NY 10029-3118		12e .I \$		9		10 Dependent care benefits	
		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans		13 <input type="checkbox"/> Health <input checked="" type="checkbox"/> Retirement <input type="checkbox"/> Disability	
		Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return		14 Other			
f Employee's address and ZIP code IMPORT CODE EH9J9JFQ		a Employee's social security number 868-28-2543					
15 State MA	Employer's state ID number WTH-11798415-003	16 State wages, tips, etc. 3200.00	17 State income tax 25.66	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2016 Department of the Treasury-Internal Revenue Service OMB# 1545-0008 Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

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		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans		13 <input type="checkbox"/> Health <input checked="" type="checkbox"/> Retirement <input type="checkbox"/> Disability	
		Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)		14 Other			
f Employee's address and ZIP code IMPORT CODE EH9J9JFQ		a Employee's social security number 868-28-2543					
15 State MA	Employer's state ID number WTH-11798415-003	16 State wages, tips, etc. 3200.00	17 State income tax 25.66	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2016 Department of the Treasury-Internal Revenue Service OMB# 1545-0008 Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)

