

		a Employee's social security number 808-80-8080		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.	
b Employer identification number (EIN) 17-8787712				1 Wages, tips, other compensation 75891.01		2 Federal income tax withheld 8800.11	
c Employer's name, address, and ZIP code Wegmans Food Markets Inc 1500 Brooks Avenue Rochester NY 14624 585-555-1212				3 Social security wages 75891.01		4 Social security tax withheld 4705.18	
				5 Medicare wages and tips 75891.01		6 Medicare tax withheld 1100.41	
				7 Social security tips		8 Allocated tips	
d Control number 77439187589247-GG				9		10 Dependent care benefits	
e Employee's first name and initial Elizabeth		Last name Johnston		Suff.		11 Nonqualified plans	
4213 E 41 St East Hempstead NY 10101 518-555-1212				13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a See instructions for box 12 DD 1818.84	
f Employee's address and ZIP code				14 Other		12b	
						12c	
						12d	
15 State NY		16 State wages, tips, etc. 75891.01		17 State income tax 5419.10		18 Local wages, tips, etc.	
Employer's state ID number 17-8787712						19 Local income tax	
						20 Locality name	

Form **W-2** Wage and Tax Statement

2015

Department of the Treasury—Internal Revenue Service

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CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code Fidelity Investments Inc 749 Avenue of the Americas New York NY 10009		1 Gross distribution \$ 11981.98	OMB No. 1545-0119 2015		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the Internal Revenue Service.
		2a Taxable amount \$ 11981.98	Form 1099-R 2b Taxable amount not determined <input type="checkbox"/> Total distribution <input checked="" type="checkbox"/>		
PAYER'S federal identification number 46-9813327	RECIPIENT'S identification number 808-80-8080	3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$ 2510.09		
RECIPIENT'S name Elizabeth Johnston Street address (including apt. no.) 4213 E 41 St City or town, state or province, country, and ZIP or foreign postal code East Hempstead NY 10101		5 Employee contributions / Designated Roth contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$		
		7 Distribution code(s) 1 IRA/SEP/SIMPLE <input type="checkbox"/>	8 Other \$ %		
		9a Your percentage of total distribution %	9b Total employee contributions \$		
10 Amount allocable to IRR within 5 years \$	11 1st year of desig. Roth contrib.	12 State tax withheld \$	13 State/Payer's state no.	14 State distribution \$	
Account number (see instructions) 981347987B742389		15 Local tax withheld \$	16 Name of locality	17 Local distribution \$	

CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number SUNY Geneseo One Livingston Way Geneseo NY 14454		OMB No. 1545-1576 2015 Form 1098-E	Student Loan Interest Statement Copy B For Borrower This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
RECIPIENT'S federal identification no. 16-1231817	BORROWER'S social security number 808-80-8080	1 Student loan interest received by lender \$ 2898.98	
BORROWER'S name Elizabeth Johnston		2 If checked, box 1 does not include loan origination fees and/or capitalized interest for loans made before September 1, 2004 <input type="checkbox"/>	
Street address (including apt. no.) 4213 E 41 St City or town, state or province, country, and ZIP or foreign postal code East Hemsptead NY 10101			
Account number (see instructions) 436578EH472389			

Form **1098-E**

(keep for your records)

www.irs.gov/form1098e

Department of the Treasury - Internal Revenue Service

CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number SUNY Geneseo One Livingston Way Geneseo NY 14454		1 Payments received for qualified tuition and related expenses \$ 18819.88	OMB No. 1545-1574 2015 Form 1098-T	Tuition Statement Copy B For Student This is important tax information and is being furnished to the Internal Revenue Service. This form may be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
FILER'S federal identification no. 16-1231817		2 Amounts billed for qualified tuition and related expenses \$		
STUDENT'S name Elizabeth Jonhston		4 Adjustments made for a prior year \$	5 Scholarships or grants \$ 1500.00	
STUDENT'S social security number 808-80-8080		6 Adjustments to scholarships or grants for a prior year \$	7 Checked if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2016 <input type="checkbox"/>	
STUDENT'S name Elizabeth Jonhston		8 Check if at least half-time student <input checked="" type="checkbox"/>	9 Checked if a graduate student <input type="checkbox"/>	
Street address (including apt. no.) 4213 E 41 St		10 Ins. contract reimb./refund \$		
City or town, state or province, country, and ZIP or foreign postal code East Hempstead NY 10101				
Service Provider/Acct. No. (see instr.) GF74378FH				

Form **1098-T**

(keep for your records)

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