

a Control number		22222		OMB No. 1545-0008		
b Employer's Identification number			1 Wages, tips, other compensation		2 Federal income tax withheld	
52-2165630			1200.00		107.45	
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld	
			1200.00		74.40	
			5 Medicare wages and tips		6 Medicare tax withheld	
Calvary World Outreach Church P.O. Box 123 Aberdeen, MD 21001			1200.00		17.40	
			7 Social security tips		8 Allocated tips	
			9 Advance EIC payment		10 Dependent care benefits	
d Employee's social security number			11 Nonqualified plans		12a	
e Employee's first name and initial      Last name			13 Statutory employee      Retirement Plan      Third-Party sick pay		12b	
			Venita P. Hensley		12c	
			444 Cherry Street		12d	
			Edgewood, Maryland 21040			
f Employee's address and ZIP code			14 Other			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MD	42342323	1200.00	19.00	1200.00		

Form **W-2** Wage and Tax Statement **2005**  
 Copy 1 For State, City, or Local Tax Department

a Control number		OMB No. 1545-0008					
b Employer's Identification number <b>52-2165630</b>			1 Wages, tips, other compensation <b>1200.00</b>		2 Federal income tax withheld <b>107.45</b>		
c Employer's name, address, and ZIP code  <b>Calvary World Outreach Church 444 Cherry Street Aberdeen, MD 21001</b>			3 Social security wages <b>1200.00</b>		4 Social security tax withheld <b>74.40</b>		
			5 Medicare wages and tips <b>1200.00</b>		6 Medicare tax withheld <b>17.40</b>		
			7 Social security tips		8 Allocated tips <b>17.40</b>		
d Employee's social security number			9 Advance EIC payment		10 Dependent care benefits		
e Employee's first name and initial		Last name		11 Nonqualified plans		12a See instructions for box 12	
<b>Venita P. Hensley 444 Cherry Street Edgewood, Maryland 21040</b>				13 Statutory employee Retirement Plan Third-Party sick pay		12b	
				14 Other		12c	
						12d	
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
<b>MD</b>	<b>42342323</b>	<b>1200.00</b>	<b>19.00</b>	<b>1200.00</b>			

Form **W-2** Wage and Tax Statement **2005**  
**Copy B To Be Filed With Employee's FEDERAL Tax Return**  
This information is being furnished to the Internal Revenue Service.

a Control number		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's Identification number <b>52-2165630</b>			1 Wages, tips, other compensation <b>1200.00</b>		2 Federal income tax withheld <b>107.45</b>			
c Employer's name, address, and ZIP code  <b>Calvary World Outreach Church 444 Cherry Street Aberdeen, MD 21001</b>			3 Social security wages <b>1200.00</b>		4 Social security tax withheld <b>74.40</b>			
			5 Medicare wages and tips <b>1200.00</b>		6 Medicare tax withheld <b>17.40</b>			
			7 Social security tips		8 Allocated tips			
d Employee's social security number			9 Advance EIC payment		10 Dependent care benefits			
e Employee's first name and initial                      Last name  <b>Venita P. Hensley 444 Cherry Street Edgewood, Maryland 21040</b>			11 Nonqualified plans			12a See instructions for box 12		
			13 Statutory employee	Retirement Plan	Third-Party sick pay	12b		
			14 Other			12c		
						12d		
15 State <b>MD</b>	Employer's state I.D. No. <b>42342323</b>	16 State wages, tips, etc. <b>1200.00</b>	17 State income tax <b>19.00</b>	18 Local wages, tips, etc. <b>1200.00</b>	19 Local income tax	20 Locality name		

Form **W-2** Wage and Tax Statement  
Copy C For EMPLOYEE'S RECORDS

**2005**

a Control number		OMB No. 1545-0008					
b Employer's Identification number <b>52-2165630</b>			1 Wages, tips, other compensation <b>1200.00</b>		2 Federal income tax withheld <b>107.45</b>		
c Employer's name, address, and ZIP code  <b>Calvary World Outreach Church 444 Cherry Street Aberdeen, MD 21001</b>			3 Social security wages <b>1200.00</b>		4 Social security tax withheld <b>74.40</b>		
			5 Medicare wages and tips <b>1200.00</b>		6 Medicare tax withheld <b>17.40</b>		
			7 Social security tips		8 Allocated tips		
d Employer's social security number			9 Advance EIC payment		10 Dependent care benefits		
e Employer's first name and initial                      Last name  <b>Venita P. Hensley 444 Cherry Street Edgewood, Maryland 21040</b>			11 Nonqualified plans		12a See instructions for box 12		
			13 Statutory employee      Retirement Plan      Third-Party sick pay		12b		
			14 Other		12c		
					12d		
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
<b>MD</b>	<b>42342323</b>	<b>1200.00</b>	<b>19.00</b>	<b>1200.00</b>			

Form **W-2** Wage and Tax Statement **2005**  
Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

a Control number		Void <input type="checkbox"/>		OMB No. 1545-0008			
b Employer's Identification number <b>52-2165630</b>			1 Wages, tips, other compensation <b>1200.00</b>		2 Federal income tax withheld <b>107.45</b>		
c Employer's name, address, and ZIP code  <b>Calvary World Outreach Church 444 Cherry Street Aberdeen, MD 21001</b>			3 Social security wages <b>1200.00</b>		4 Social security tax withheld <b>74.40</b>		
			5 Medicare wages and tips <b>1200.00</b>		6 Medicare tax withheld <b>17.40</b>		
			7 Social security tips		8 Allocated tips		
d Employee's social security number			9 Advance EIC payment		10 Dependent care benefits		
e Employee's first name and initial      Last name  <b>Venita P. Hensley 444 Cherry Street Edgewood, Maryland 21040</b>			11 Nonqualified plans		12a See instructions for box 12		
			13 Statutory employee      Retirement Plan      Third-Party sick pay		12b		
			14 Other		12c		
					12d		
15 State <b>MD</b>	Employer's state I.D. No. <b>42342323</b>	16 State wages, tips, etc. <b>1200.00</b>	17 State income tax <b>19.00</b>	18 Local wages, tips, etc. <b>1200.00</b>	19 Local income tax	20 Locality name	

Form **W-2** Wage and Tax Statement  
Copy D For Employer

**2005**