REISSUED a Employee's social secur	rity number		Safe, Accurate, Visit the IRS Website				IRS Website	
STATEMENT 414-8	35-2096	OMB No	o. 1545-00	008 FAST! Use		île)	at www.ii	rs.gov/efile.
<b>b</b> Employer identification number			1 V	Vages, tips, other compensation	2	Federa	I income tax	withheld
95-5162866				180068.99		4259	3.63	
c Employer's name, address, and ZIP code			3 8	Social security wages	4	Social	security tax	withheld
Thomas-Edwards and Sons				153302.54		1172	7.64	
58092 Richard Square Ap	t. 479		5 N	Medicare wages and tips	6	Medica	re tax withh	
Port Joanna NE 40843	-0170		7 (	143141.19 Social security tips	8	Allocat	4151	.09
1010 00011110 112 100 10	02.0		7 8	* *	*	Allocati		41 10
d Control number				153302.54 dvance EIC payment	10	Danas		41.19
			9 A	dvance EIC payment	10	Depen	dent care be	eneiits
8984755							103	
e Employee's first name and initial Last name			11 N	lonqualified plans	12	a See in	structions f	or box 12
			143			6433		
Kevin Wells			13 Statu		/ 12	b	1	
66270 Samantha Route			employee plan sick pay			н 518		
West Rachel NJ 19	9328-1170		14 (	Other (see enclosed Notice to Emplo	yee) <b>12</b>	С	1	
							882	
					12	d		
						E	969	
f Employee's address and ZIP code								
	tate wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Local	income tax	(	20 Locality name
MN 284-40-068 889	919.3	6793.46		130188.11	2292	9.66		Haley Streets
LA 916-19-806 85	021.21	6398.61		200154.43	3186	3.91		Thomas Greens

Wage and Tax

5070 **Statement** Form W-2

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 soci	al security number		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					
S	TATEMENT	4:	L4-85-2096	OMB N	OMB No. 1545-0008 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				Wages, tips, other compensation			2 Federal income tax withheld			
95-5162866					180068.99			42593.63		
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Thomas-Edwards and Sons				153302.54			11727.64			
58092 Richard Square Apt. 479			5 Medicare wages and tips			6 Medicare tax withheld				
Port Joanna NE 40843-0170			143141.19			4151.09				
			7 Social security tips			8 Allocated tips				
				153302.54			143141.19			
d Control number			9 Advance EIC payment			10 Dependent care benefits				
8984755							103			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Kevin Wells			143  13 Statutory Retirement Third-party			6433				
66270 Samantha Route				employee plan sick pay			125	518		
00270 Samancha Rouce							210			
West Rachel NJ 19328-1170			14 Other (see enclosed Notice to Employee)			12c	ĺ			
						E 882				
							ŀ	12d	1	
							E	969		
	yee's address and ZIP co		T -	1 -						
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income ta	<	20 Locality name
MN	284-40	0-068	88919.3	6793.46		130188.11	22	929.66		Haley Streets
LA	916-19	9-806	85021.21	6398.61		200154.43	31	863.91		Thomas Greens

Wage and Tax

**Statement** Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

