REISSUED	ISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website			
STATEMENT	42	20-83-7336	OMB N	o. 1545-0	800	FAST! Use		THE	at www.i	rs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld			
80-6012027				43904.69				16037.48			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
George, Joseph and Acevedo LLC				53684.46				4106.86			
440 April Mall Apt. 644				5 Medicare wages and tips				6 Medicare tax withheld			
West Andrew VT 22908-5492			40427.92				1172.41				
West Andrew VI 22900-3492				7 Social security tips				8 Allocated tips			
					5368				4042		
d Control number				9 Advance EIC payment			10 Dependent care benefits				
8569545									224		
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12				
Martin Becker			151				G 7385				
				13 Statutory Retirement Third-party employee plan sick pay				12b	ı		
0482 Jenna Street Suite 862				Х		х			126		
Simmonsberg RI 44511-9961				14 Other (see enclosed Notice to Employee)			yee)	12c	i		
							E	674			
							12d				
								D	934		
f Employee's address and ZIP co	de										
	Employer's state ID number 16 State wages, tips, etc. 17 State income tax		18 Local wages, tips, etc. 19		19	Local income tax		20 Locality name			
GA 134-58	3-681	19993.22	1954.86		45507.91 6		61	49.35	Lindsey Parkways		
MN 158-74	1-091	21302.69	2079.26	50420.5		60	6005.48		Maria Knoll		

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement

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.

REISSUED	a Employee's soci	al security number			This information is being furnis															
STATEMENT	4:	20-83-7336	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													
80-6012027				43904.69			16037.48													
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld													
George, Joseph and Acevedo LLC			53684.46			4106.86														
440 April Mall Apt. 644 West Andrew VT 22908-5492			5 Medicare wages and tips 40427.92 7 Social security tips			6 Medicare tax withheld 1172.41 8 Allocated tips														
														53684.46			40427.92			
										d Control number			9 Advance EIC payment			10 Dependent care benefits				
8569545							224													
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12														
Martin Becker 0482 Jenna Street Suite 862 Simmonsberg RI 44511-9961				151 13 Statutory Retirement Third-party			G 7385													
				employee plan sick pay  X X Discrete plan sick pay  14 Other (see enclosed Notice to Employee)			20	126												
							12c													
							E	674												
						12d														
						D 934														
f Employee's address and Z		Tab Order order Constant	17 State income tax		140 1 1	10.1														
15 State Employer's state		16 State wages, tips, etc.			10 = 10 mag 10, np 1, 10 m		9 Local income tax		20 Locality name											
GA 134-	-58-681	19993.22	1954.86		45507.91		6149.35		Lindsey Parkways											
MN 158-	-74-091	21302.69	2079.26		50420.5	600	5.48		Maria Knoll											

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

