REISSUED STATEMENT	554 FB 564		Safe, Accurate, OMB No. 1545-0008 FAST! Use			Visit the IRS Website at www.irs.gov/efile.			
b Employer identification number	STATEMENT			Wages, tips, other compensation			2 Federal income tax withheld		
63-8160206				62491.8			7172.15		
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld		
Stevenson-Moran LLC				44291.4			3388.29		
7020 Robert Dam				5 1	Medicare wages and tips		6 Medicare tax withheld		
Port Frederick AR 92158-3440				45637.25			1323.48		
				7 Social security tips			8 Allocated tips		
					44291.4			4563	37.25
d Control number			9 /	Advance EIC payment		10	ependent care b	enefits	
5909189								285	
e Employee's first name and initial	Last name	ı	·	11 1	Nonqualified plans		12a S	See instructions	for box 12
			203			P 4843			
Rebecca Lee				13 Statu		Third-party	12b		
9943 Nathan Mission Suite 490				empi	oyee plan	sick pay		889	
Port Whitr	nev NJ	09976-3506		14 (Other (see enclosed Notice	e to Employee)	12c	ı	
Toro miremey no ossio soco								P 313	
							12d		
								677	
f Employee's address and ZIP coo	ما							077	
15 State Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, et	tc. 19	Local inco	me tax	20 Locality name
NC 056-07	-412	32078.04	1829.36		64797.1	1:	2108.73 Faulkner Estate		Faulkner Estates
ME 224-51	564	30014.0	1905.8		77483.69	6.	536.3	9	Callahan Villages

Wage and Tax

Form W-2 Statement

5010

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 socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required					
S ⁻	TATEMENT	77	1-57-7621	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 Emplo	b Employer identification number				Wages, tips, other compensation			2 Federal income tax withheld		
63-8160206				62491.8			7172.15			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Stevenson-Moran LLC				44291.4			3388.29			
7020 Robert Dam				5 Medicare wages and tips			6 Medicare tax withheld			
				45637.25			1323.48			
	Port Frederick AR 92158-3440				7 Social security tips			8 Allocated tips		
				44291.4			45637.25			
d Contro	d Control number				9 Advance EIC payment			10 Dependent care benefits		
	5909189								285	
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Rebecca Lee				203 13 Statutory Retirement Third-party			P 4843			
	9943 Nathan Mission Suite 490				employée plan sick pay				889	
Port Whitney NJ 09976-3506				14 Other (see enclosed Notice to Employee)			12c			
							P 313			
								12d		
							677			
f Employee's address and ZIP code					T				1	
15 State	, .,		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		cal income tax		20 Locality name
NC	056-07	/-412	32078.04	1829.36		64797.1	121	108.73		Faulkner Estates
ME	224-51	564	30014.0	1905.8		77483.69	653	36.39		Callahan Villages

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

