R	REISSUED	a Employee's socia	l security number			Sa	fe, Accurate,		H	Visit the	IRS Website	
ST	TATEMENT	67	0-68-8656	OMB N	o. 1545-0	008 FA	ST! Use	G	file	at www.i	rs.gov/efile.	
b Employer identification number					1 Wages, tips, other compensation			2	Federal income tax withheld			
22-5302958					102866.82				17359.05			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Parsons-Johnson Group					87126.3				6665.16			
1079 Steven Villages Apt. 125 South Karen GA 71709-2875					5 Medicare wages and tips				6 Medicare tax withheld			
					123083.52				3569.42			
					7 Social security tips				8 Allocated tips			
					87126.3				123083.52			
d Control number					9 Advance EIC payment			10	10 Dependent care benefits			
	7640641								284			
e Employee's first name and initial Last name				11 Nonqualified plans			12	12a See instructions for box 12				
					247				н 3270			
	April Bean				13 Statutory Retirement Third-party			12	b	1		
6648 Rachel Orchard Apt. 066					employee plan sick pay					142	142	
Brianberg MI 59407-1579						14 Other (see enclosed Notice to Employee)				Î		
									737			
										12d		
									G	507		
	yee's address and ZIP cod		T	_								
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wag	· · · · ·		income ta	x	20 Locality name	
DE	409-36	-061	47147.8	3459.24		72126.	36	1316	5.47		David Route	
NM	021-13	-703	55453.76	3797.75		90619.	31	1183	9.13		Williams Underpass	

Wage and Tax
Form W-2 Statement

5070

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 social security number This information is being furnished to the Internal Revenue Service. If you are											
S	TATEMENT	67	70-68-8656	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	yer identification number	l .		N	Wages, tips, other compensation			Federal income tax withheld				
22-5302958					102866.82			17359.05				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Parsons-Johnson Group					87126.3			6665.16				
1079 Steven Villages Apt. 125 South Karen GA 71709-2875					5 Medicare wages and tips			6 Medicare tax withheld				
					123083.52			3569.42				
					7 Social security tips			8 Allocated tips				
					87126.3			123083.52				
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	7640641							284				
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
	April Bean 6648 Rachel Orchard Apt. 066					247 13 Statutory Retirement Third-party			н 3270			
						employee plan sick pay			142			
Brianberg MI 59407-1579					14 Other (see enclosed Notice to Employee)			12c				
								737				
									12d			
								G	G 507			
f Employee's address and ZIP code										1		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax		20 Locality name		
DE	409-36	5-061	47147.8	3459.24		72126.36 13		165.47		David Route		
NM	021-13	3-703	55453.76	3797.75		90619.31	11	839.13		Williams Underpass		

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

