RE	REISSUED a Employee's social security number				Safe, Accurate,					Visit the IRS Website				
STA	ATEMENT	31	.3-68-9986	OMB N	o. 1545-	8000	FAST! Us	e 🔍		le)	at www.i	rs.gov/efile	€.	
b Employe	er identification number			•	1	Wages, tip	s, other compe	ensation	2	Federa	l income tax	withheld		
92-3130231					208605.79				- 6	66817.73				
c Employe	c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Fry, Aguirre and Forbes Group					227288.28				1	17387.55				
3693 Jones Extension					5 Medicare wages and tips				6					
ъ	Port Joelton ID 72610-2365					169065.6				4902.9				
	Port Joerton ID 72610-2363					7 Social security tips				8 Allocated tips				
					227288.28					169065.6				
d Control number					9 Advance EIC payment				10	10 Dependent care benefits				
_	5100120									115				
e Employe	e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
	Kim Acevedo 4208 Hatfield Terrace Apt. 356					279				D 5062				
l r						13 Statutory Retirement Third-party employee plan sick pay					i			
4										G	367			
Glennland WA 97925-8949						14 Other (see enclosed Notice to Employee)					! !			
3/323 0343										G	533			
									12d					
										E	992			
f Employe	ee's address and ZIP cod									<u> </u>	992			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Loca	Il wages, tips,	etc.	19 Local in	come tax	:	20 Localit	y name	
FL	922-52	-610	106594.75	3545.72			702.69		39028	. 95		Herman	Fields	
IA	947-71	_750	112343.69	3386.19		1520	38.63		37206	16		D	T - 1	
IA	94/-/1	- 132	114343.09	2300.19		1326	20.02	-	3/206	. то		Bean	⊥aĸes	

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 s		a Employee's socia	•		This information is being furnished to the Internal Revenue Service. It to file a tax return, a negligence penalty or other sanction may be imp							
	STATEMENT 313-68-9986 OMB				this income is taxable and you fail to report it.							
b Employe	b Employer identification number					Vages, tips, other compensation		Federal income tax withheld				
92-3130231						208605.79	66817.73					
c Employe	c Employer's name, address, and ZIP code					ocial security wages	4 Social security tax withheld					
Fry, Aguirre and Forbes Group						227288.28	17387.55					
3693 Jones Extension					5 N	ledicare wages and tips	6 Medicare tax withheld					
						169065.6	4902.9					
P	Port Joelton ID 72610-2365					ocial security tips	8 Allocated tips					
						227288.28	169065.6					
d Control n	d Control number					9 Advance EIC payment			10 Dependent care benefits			
5	5100120								115			
e Employe	e Employee's first name and initial Last name					lonqualified plans	12a See instructions for box 12					
Kim Acevedo					13 Statu	279	D 5062					
	4208 Hatfield Terrace Apt. 356					tory Retirement Third-party byee <u>plan</u> <u>sick pay</u>	12b					
4									367			
Glennland WA 97925-8949					14 (Other (see enclosed Notice to Employ	12c					
							G	533				
								12d				
							E	992				
f Employee's address and ZIP code						<u></u>						
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		_ocal income tax		20 Locality name		
FL	922-52	2-610	106594.75	3545.72		209702.69	39	028.95		Herman Fields		
IA	947-71	L-752	112343.69	3386.19		152838.63	37	206.16		Bean Lakes		

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

