INCHOOLD	cial security number		Safe, Accurate, Visit the IRS Website						
STATEMENT 7	20-70-6553	OMB N	o. 1545-00	008 FAST! Use	5	file	at www.ir	s.gov/efile.	
<b>b</b> Employer identification number			1 \	Vages, tips, other compensation		2 Federal	l income tax	withheld	
02-8130512			235297.34			47141.18			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Pierce LLC and Sons			204021.7			15607.66			
674 Dustin Stravenue			5 Medicare wages and tips			6 Medicare tax withheld			
Woodhaven CT 25555-3793				272314.33		7897.12			
woodnaven C1 25555-5795			7 Social security tips			8 Allocated tips			
				204021.7			272314.33		
d Control number			9 Advance EIC payment			10 Dependent care benefits			
2679519						232			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
Matthew Lopez			192			н 1198			
			13 Statutory Retirement Third-party employee plan sick pay			12b			
811 Jessica Mission			X			D	452		
New Kim WV 49959-6342			14 Other (see enclosed Notice to Employee)			12c	1		
						P	929		
						12d			
						G	692		
f Employee's address and ZIP code							002		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Loc	cal income tax		20 Locality name	
sc 703-54-358	110036.73	5072.6		240279.71	302	98.46		Kimberly Island	
ОН 162-18-824	106223.87	4687.19		224775.35	262	80.84		Larry Views	

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.

REISSUED	a Employee's so	cial security number		This information is being furnished to the Internal Revenue Service. If you are required							
STATEMEN	_	720-70-6553	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>b</b> Employer identification	-			1 \	•			2 Federal income tax withheld			
02-8130512				235297.34			47141.18				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Pierce LLC and Sons				204021.7			15607.66				
674 Dustin Stravenue Woodhaven CT 25555-3793			5 Medicare wages and tips			6 Medicare tax withheld					
			272314.33			7897.12					
			7 Social security tips			8 Allocated tips					
				204021.7			272314.33				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
2679519								232			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Matthew Lopez			192			н 1198					
			13 Statu			12b					
811 Jessica Mission			emp	oyee plan sick pay		D	452				
				Other (see enclosed Notice to Employ	(ee)	12c					
New Kim WV 49959-6342			The Cartillation of Cartillation of Cartillation of Cartillation			120	İ				
						P					
							12d	ı			
							G	692			
f Employee's address an	d ZIP code										
15 State Employer's s	tate ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	Local income tax		20 Locality name		
SC 70	3-54-358	110036.73	5072.6		240279.71	30	298.46		Kimberly Island		
ОН 16	2-18-824	106223.87	4687.19		224775.35	26	280.84		Larry Views		

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

