REISSUED		ial security number			;	Safe, Accurat	e,	GH		Visit the	IRS Web	osite
STATEMENT	0	25-68-7624	OMB N	o. 1545-00	008 l	FAST! Use		~ fi	6	at www.i	rs.gov/ef	ile.
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld				
94-1067211				95157.95				27386.22				
c Employer's name, addres	s, and ZIP code			3 Social security wages				4 Social security tax withheld				
Sharp and Sons Group				74715.76				5715.76				
837 Katherine Valley Suite 985				5 Medicare wages and tips				6 Medicare tax withheld				
Sandershaven AZ 43415-7900				123299.08 7 Social security tips				3575.67 8 Allocated tips				
				74715.76				123299.08				
d Control number				9 Advance EIC payment				10 Dependent care benefits				
5952299									·	153		
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12				
				288				G 8065				
Brittany Moreno				13 Statu			nird-party ck pay	12b		1		
5000 Payne Vista Apt. 150				employee plan sick pay					G	G 581		
Phillipsland OR 24179-8190					Other (see e	nclosed Notice to	Employee)	12c		1		
									E	E 176		
								12d				
									G	609		
f Employee's address and										•		
15 State Employer's sta	e ID number	16 State wages, tips, etc.	17 State income tax		18 Local v	wages, tips, etc.	19	Local inc	ome tax		20 Loca	lity name
MD 354	-57-838	45505.48	5583.64		89669.89 1		13	3731.5			Dana	Street
СТ 828	-26-362	50656.3	5195.57		107519.17		18	18292.8			Olson	Stream

Wage and Tax **Statement**

Form W-2

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.

REISSUED	a Employee's socia	al security number				rmation is being furnis							
STATEMENT	02	25-68-7624	OMB No	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					
94-1067211				95157.95				27386.22					
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld					
Sharp and Sons Group				74715.76				5715.76					
837 Katherine Valley Suite 985				5 Medicare wages and tips				6 Medicare tax withheld					
Sandershaven AZ 43415-7900					123299.08				3575.67				
					7 Social security tips				8 Allocated tips				
				74715.76				123299.08					
d Control number				9 Advance EIC payment				10 Dependent care benefits					
5952299									153				
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12						
Brittany Moreno				288				G 8065					
				13 Statutory Retirement Third-party employee plan sick pay				12b					
5000 Payne Vista Apt. 150					X			G	581				
Phillipsland OR 24179-8190					14 Other (see enclosed Notice to Employee)				ı				
								E	E 176				
								12d					
								G	609				
f Employee's address and ZIP	endo						-		003				
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wag	ges, tips, etc.	19 Lo	cal income	tax	20 Loca	lity name		
MD 354-5	7-838	45505.48	5583.64		89669.89		137	731.5		Dana	Street		
CT 828-2	26-362	50656.3	5195.57		107519	9.17	182	292.8		Olson	Stream		

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

