F	REISSUED	a Employee's socia	•			Sa	fe, Accurate,	20.0	.∠GH		Visit the	IRS Website	
S ⁻	TATEMENT	11	L3-82-0319	OMB N	o. 1545-(0008 FA	ST! Use	G	7 111	e	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			2 Federal income tax withheld				
87-9807361						223731.94			51694.91				
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Wilson-Friedman Group					223067.62			17064.67					
61559 Joshua Pines					5 Medicare wages and tips				6 Medicare tax withheld				
					169476.34				4914.81				
	West Timothymouth CO 00921-9578					7 Social security tips				8 Allocated tips			
					223067.62				169476.34				
d Control number					9 Advance EIC payment			10 Dependent care benefits					
3878571									152				
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12				
	Christopher White					172			D 8762				
						13 Statutory Retirement Third-party employee plan sick pay			12b		ı		
73873 Nelson Rapids Christopherberg MA 54819-1218					X X 14 Other (see enclosed Notice to Employee)					948			
								yee)	12c				
									G	601			
									12d				
										н	323		
f Emplo	oyee's address and ZIP cod	е						•					
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wa	ges, tips, etc.		ocal inco			20 Locality name	
ME	921-42	-502	100779.81	11260.89		212711.26 2		24	4559.97			Andrews Trail	
NM	678-13	-905	102606.12	10812.47		256799	9.25	27	602	.42		Manuel Unions	

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 req											
S	TATEMENT	1	13-82-0319	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						1 Wages, tips, other compensation			2 Federal income tax withheld			
87-9807361					223731.94			51694.91				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Wilson-Friedman Group					223067.62			17064.67				
	61559 Joshua Pines					Medicare wages and tips		6 Medicare tax withheld				
					169476.34			4914.81				
	West Timothymouth CO 00921-9578					7 Social security tips			8 Allocated tips			
					223067.62			169476.34				
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	3878571								152			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
	Christopher White 73873 Nelson Rapids Christopherberg MA 54819-1218					172			D 8762			
						13 Statutory Retirement Third-party						
						employee plan sick pay X 14 Other (see enclosed Notice to Employee)			948			
									12c			
							,	_				
									G 601			
								12d				
					н 323							
f Employee's address and ZIP code								,				
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		
ME	921-42	2-502	100779.81	11260.89	212711.26 2		245	24559.97		Andrews Trail		
NM	678-13	3-905	102606.12	10812.47		256799.25	276	602.42		Manuel Unions		

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

