REISSUED a Employee's soo	ial security number			Safe, Accurate,	Re 🖸	A HIO	Visit the	IRS Webs	ite	
STATEMENT 4	02-49-8899	OMB N	o. 1545-00	DOS FAST! Use		≁file •	at www.i	irs.gov/efile	€.	
b Employer identification number			1 \	Wages, tips, other compensation		2 Feder	al income ta	x withheld		
73-1750562				45937.66			5952.67			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Nguyen-Lee Group				53017.68			4055.85			
20343 Arnold Island Suite 722			5 Medicare wages and tips			6 Medicare tax withheld				
Loganhaven PA 63096-3906				46984.14	1362.54					
			7 Social security tips			8 Allocated tips				
				53017.68			4698			
d Control number			9 /	Advance EIC payment		10 Depe	ndent care b	enefits		
166997							236			
e Employee's first name and initial Last nar	ne	•	11 1	Nonqualified plans		12a See i	nstructions	for box 12		
			169			P 9705				
Andrea Garcia			13 Statu		ly	12b	1			
52626 Morgan Camp			empi	oyee plan sick pay			434			
New Wendy NY 91482-8503			14 Other (see enclosed Notice to Employee)			12c	ı			
						D	787			
						12d				
						E	345			
f Employee's address and ZIP code							10.50			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income ta	ax	20 Locality	y name	
GA 427-17-376	21981.5	2304.73		34955.58	82	87.99		King S	Summit	
WA 640-93-890	21755.15	2106.37		49710.62 6		6230.06		Paul	Inlet	

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.

RE	EISSUED	a Employee's socia	I security number			This information is being furnis					
	ATEMENT	40	2-49-8899	OMB N	DMB 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			
73-1750562				45937.66			5952.67				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Nguyen-Lee Group				53017.68			4055.85				
20343 Arnold Island Suite 722 Loganhaven PA 63096-3906			5 Medicare wages and tips			6 Medicare tax withheld					
			46984.14			1362.54					
			7 Social security tips			8 Allocated tips					
				53017.68			46984.14				
d Control n	number				9 /	Advance EIC payment		10 Depe	endent care b	enefits	
1	66997								236		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Andrea Garcia			169			P 9705					
			13 Statu			12b					
52626 Morgan Camp			empl	oyee plan sick pay			434				
			14 Other (see enclosed Notice to Employee)			12c					
New Wendy NY 91482-8503							D	787			
						12d					
									1		
							_	E	345		
f Employee	e's address and ZIP cod		I ac Chata warna tina ata	17 State income tax		10	40.14	ocal income		100 1	lit
	Employer's state ID nu		16 State wages, tips, etc.			18 Local wages, tips, etc.			ldX		lity name
GA	427-17	-3/6	21981.5	2304.73		34955.58	828	37.99		King	Summit
WA	640-93	8-890	21755.15	2106.37		49710.62	623	30.06		Paul	Inlet

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

