F	REISSUED	a Employee's socia	al security number			Safe, Acc	urate,	•	Z HID	Visit the	IRS Website	
S	TATEMENT	59	96-82-5791	OMB I	No. 1545-0	008 FAST! Us	e T	$G^{\sim}$	Tile)	at www.i	rs.gov/efile.	
<b>b</b> Employer identification number						1 Wages, tips, other compensation			2 Federal income tax withheld			
82-5095433						43782.65			12455.32			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Hale Inc Inc						35586.97			2722.4			
28742 Renee Glen					5				6 Medicare tax withheld			
Clambumah CD 12100-0245						36071.38			1046.07			
Clarkburgh SD 13188-8245						7 Social security tips			8 Allocated tips			
						35586.97			36071.38			
d Control number						9 Advance EIC payment 10 Dependent care benefits			enefits			
	3510110									232		
e Employee's first name and initial Last name						11 Nonqualified plans 12a See i			12a See in	nstructions for box 12		
					133				5446			
Mario King					13 Statutory Retirement Third-party				12b			
250 Holloway Viaduct						employee plan sick pay			D 329			
Scottmouth NJ 58527-4644					14	14 Other (see enclosed Notice to Employee)			12c			
SCOCLINGUCII NO SOSZI-4044										879		
									12d			
									_			
									P	198		
f Emplo	eyee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	ļ	18 Local wages, tips,	oto	10 10	ocal income tax		20 Locality name	
						0	BIG.				,	
NJ	422-51	-968 	20476.54	1419.71		42892.27		864	16.14		Jennifer Shoals	
sc	218-45	<b>-715 22445</b> .66 <b>1503</b> .83		1503.83	55047.53		806	8060.31		Jones Stravenue		

Wage and Tax Statement 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 social security number			This information is being furnished to the Internal Revenue Service. If you are require						
STATEMENT 596-82-5791			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 number	1 V	Vages, tips, other compensation	2 Fe	2 Federal income tax withheld					
82-5095433		43782.65	12	12455.32					
c Employer's name, address, and ZIP code	3 8	Social security wages	4 Sc	4 Social security tax withheld					
Hale Inc Inc		35586.97	27	2722.4					
28742 Renee Glen	5 N	Medicare wages and tips	6 M						
Clarkburgh CD 12100		36071.38		1046.07					
Clarkburgh SD 13188	3-8245		7 8	Social security tips	8 AI	8 Allocated tips			
		35586.97		36071.38					
d Control number			9 A	dvance EIC payment	10 De	10 Dependent care benefits			
3510110						232			
e Employee's first name and initial Last name	ie		11 N	lonqualified plans	12a S	12a See instructions for box 12			
				133		5446			
Mario King	13 Statutory Retirement Third-party			12b					
250 Holloway Viadu	X empl	pyee plan sick pay	I	D 329					
Scottmouth NJ	14 (	Other (see enclosed Notice to Emplo	oyee) 12c	12c					
SCOCCINGUENT NO				879					
			12d						
					_				
					I	198			
f Employee's address and ZIP code  15 State Employer's state ID number		18 Local wages, tips, etc.	19 Local incom	e tay	20 Locality name				
NJ 422-51-968	16 State wages, tips, etc. <b>20476.54</b>	17 State income tax <b>1419.71</b>		42892.27	8646.14	- 10	,		
NO	204/0.34	1419./1		42032.21	0040.14	<b>t</b>	Jennifer Shoals		
SC 218-45-715	22445.66	1503.83		55047.53	8060.3	L	Jones Stravenue		

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

