REISSUED				Safe, Accurate,					Visit the IRS Website			
STATEMENT	71	L5-66-7892	OMB N	o. 1545-	8000	FAST! Us	se		le	at www.i	rs.gov/efile.	
<b>b</b> Employer identification number				1 Wages, tips, other compensation				2	2 Federal income tax withheld			
21-3754442					236463.51				66194.17			
c Employer's name, address, and 2	ZIP code			3 Social security wages				4	4 Social security tax withheld			
White, Gregory and Barrett Group				196232.29				1	15011.77			
84493 Pamela Mountains				5 Medicare wages and tips				6				
Port Jorge CO 15623-5778					203719.17				5907.86			
Port Jorge CO 15623-5778					7 Social security tips				8 Allocated tips			
					196232.29				203719.17			
d Control number				9 Advance EIC payment 10 Dependent ca					enefits			
2256174										147		
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
				189					D 9594			
Kim Evans				13 Statutory Retirement Third-party				12b				
72031 Stone Mount Apt. 813					ployee	X	sick pay		D	898		
New Chad OK 50441-7156					14 Other (see enclosed Notice to Employee)			e) 12c		1		
										717		
					!				12d			
										851		
f Employee's address and ZIP cod	Δ.									031		
15 State Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Loca	l wages, tips,	etc.	19 Local in	come tax	(	20 Locality name	
PA 846-29	-628	107414.57	9986.89	175105.7		28295	8295.12		Mario Drives			
ні 990-35	-343	120880.51	12810.04		2618	322.77	,	27889	.77		Robert Station	

Wage and Tax

This information is being furnished to the Internal Revenue Service.

Form W-2

5070 **Statement** Copy B--To Be Filed with Employee's FEDERAL Tax Return

Department of the Treasury--Internal Revenue Service

Cut here. Keep lower portion for your records.

RFIS	SUED	a Employee's socia	I security number		This information is being furnished to the Internal Revenue Service. If you are required						
	EMENT	71	.5-66-7892	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 Employer identification number				1 V	Vages, tips, other compensation		Federal income tax withheld				
21-3754442					236463.51		66194.17				
c Employer's name, address, and ZIP code				3 5	Social security wages		4 Social security tax withheld				
White, Gregory and Barrett Group					196232.29		15011.77				
84493 Pamela Mountains				5 N	ledicare wages and tips		6 Medicare tax withheld				
Port Jorge CO 15623-5778					203719.17		5907.86				
				7 8	ocial security tips		8 Allocated tips				
					196232.29		203719.17				
d Control number				9 A	dvance EIC payment		10 Dependent care benefits				
2256174							147				
e Employee's first name and initial Last name				11 N	lonqualified plans		12a See instructions for box 12				
Kim Evans					189		D 9594				
				13 Statu	tory Retirement Third-party		12b				
72031 Stone Mount Apt. 813				empl	oyee plan sick pay		D	898			
<del>-</del>				14 (	Other (see enclosed Notice to Employ	(00)	12c				
New Chad OK 50441-7156				1.4	other (see enclosed Notice to Employ	(66)					
							717				
								12d			
								851			
f Employee's address and ZIP code											
15 State Em	ployer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax		20 Locality name	
PA	846-29	-628	107414.57	9986.89		175105.7		28295.12		Mario Drives	
ні	990-35	-343	120880.51	12810.04		261822.77	278	389.77		Robert Station	

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

