REISSUED a Employee's social security number			Safe, Acci	urate,			Visit the I	RS Website		
STATEMENT 115-08-6865	OMB No	. 1545-000	8 FAST! Us	e	-~ III	le)	at www.ir	s.gov/efile.		
b Employer identification number	•	1 Wa	ages, tips, other compe	ensation	2	Federal	income tax	withheld		
20-0392826			204927.42			73868.56				
c Employer's name, address, and ZIP code		3 So	cial security wages		4	Social se	ecurity tax v	vithheld		
Davis, Davidson and Brown PLC			222710.5			17037.35				
19129 Henry Circles Suite 765			5 Medicare wages and tips			6 Medicare tax withheld				
North Richardton NC 82523-7144			150320.08				4359.28			
			7 Social security tips				8 Allocated tips			
			222710.5					20.08		
d Control number			vance EIC payment		10	•	ent care be	nefits		
3920365						156				
e Employee's first name and initial Last name		11 No	nqualified plans		12a	See ins	tructions fo	or box 12		
Para Grand			264			P 4257				
Aaron Gross		13 Statutor employ		Third-party sick pay	12b	1				
7697 Alvarez Mission			pian	X		D	297			
Kellystad LA 19272-0204			14 Other (see enclosed Notice to Employee)			i				
-						G	764			
					12d	1				
						D	881			
f Employee's address and ZIP code										
15 State Employer's state ID number 16 State wages, tips, etc.	17 State income tax		18 Local wages, tips,		19 Local inc			20 Locality name		
OR 680-86-094 102664.93	4005.59		149146.53	3	31103	.51		Carrillo Ports		
PA 385-36-761 95800.58	5903.37	2	238780.72	3	39667	. 96		James Passage		

Wage and Tax Statement

Form W-2

5010

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 soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if						
S	TATEMENT	1	15-08-6865	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Emplo	b Employer identification number			Wages, tips, other compensation				Federal income tax withheld			
20-0392826				204927.42			73868.56				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Davis, Davidson and Brown PLC			222710.5			17037.35					
19129 Henry Circles Suite 765 North Richardton NC 82523-7144			5 Medicare wages and tips 150320.08				6 Medicare tax withheld 4359.28				
											7 Social security tips
							222710.5			150320.08	
d Control number			9 Advance EIC payment			10 Dependent care benefits					
3920365							156				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Aaron Gross 7697 Alvarez Mission Kellystad LA 19272-0204			264			P 4257					
			13 Statutory Retirement Third-party sick pay X 14 Other (see enclosed Notice to Employee)			12b		i			
							D	297			
						12c					
							G	764			
								12d			
							D	881			
f Emplo	yee's address and ZIP cod	la.								001	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19	Local inc	ome tax		20 Locality name
OR	680-86	5-094	102664.93	4005.59	149146.53		31	31103.51			Carrillo Ports
PA	385-36	5-761	95800.58	5903.37		238780.72	39	667	. 96		James Passage

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

