REISSUED a Employee's	social security number		Safe, Accurate,				Visit the IRS Website		
STATEMENT	514-93-0382	OMB N	o. 1545-00	108 FAST! Use		≁file >	at www.irs.gov/efile.		
b Employer identification number			1 V	Vages, tips, other compensation	ı	2 Federa	I income tax withheld		
39-1044489				190319.2			51721.47		
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Hayes Group Ltd			206262.56			15779.09			
2703 Perez Orchard Suite 096			5 Medicare wages and tips			6 Medicare tax withheld			
Susanchester IL 66181-5495				173207.75	5023.02				
Susanchester IL 00101-3493			7 Social security tips			8 Allocated tips			
				206262.56			173207.75		
d Control number			9 A	dvance EIC payment		10 Depend	dent care benefits		
8064376							112		
e Employee's first name and initial Last	t name	•	11 N	lonqualified plans		12a See in:	structions for box 12		
Ronnie Mason			236			3990			
			13 Statutory Retirement Third-party employee plan sick pay			12b			
904 Perez Lakes Suite 337			empi	x	ay		598		
Williamberg H	II 36262-9068		14 (Other (see enclosed Notice to Er	nployee)	12c			
Williamberg III 30202 3000						D	D 368		
						12d			
						G	720		
f Employee's address and ZIP code							720		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	ļ	18 Local wages, tips, etc.	19	Local income tax	20 Locality name		
IA 787-39-986	92296.57	8415.78		219734.51	21	569.51	Figueroa Roads		
WY 277-44-042	89148.58	10402.87		199292.44	27	342.87	Hart Summit		

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.

R	REISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
ST	TATEMENT	5:	14-93-0382	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 Emplo	yer identification number			<u>.</u>	1	Wages, tips, other compensation		2	Federal	l income tax	withheld
39-1044489				190319.2			51721.47				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Hayes Group Ltd				206262.56			15779.09				
2703 Perez Orchard Suite 096			5 Medicare wages and tips 173207.75			6 Medicare tax withheld 5023.02					
										Susanchester IL 66181-5495	
						206262.56				1732	07.75
d Contro	ol number				9	Advance EIC payment		10	Depend	dent care be	enefits
	8064376									112	
e Emplo	yee's first name and initial	Last nam	е		11	Nonqualified plans		12a	See ins	structions	for box 12
			236			3990					
	Ronnie Mason			13 Statutory Retirement Third-party			12b				
904 Perez Lakes Suite 337			en	nployee plan sick pay				598			
Williamberg HI 36262-9068			14 Other (see enclosed Notice to Employee)			12c					
	MITITIANDEL	.g	30202 3000						D	368	
								12d	ע	300	
								124		ĺ	
									G	720	
	yee'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 wages, tips, etc.	19	Local inc	come tax		20 Locality name
IA	787-39	-986	92296.57	8415.78		219734.51	21	.569	.51		Figueroa Roads
WY	277-44	-042	89148.58	10402.87		199292.44	27	342	. 87		Hart Summit

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

