REISSUED				Safe, Accurate, Visit the IRS Web									
STATEMENT	45	51-60-1661	OMB N	o. 1545-0	800	AST! Use			<u> </u>	at www.ir	rs.gov/efile.		
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld					
15-5774132					16734		18785.85						
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Adams, Reyes and Vega Ltd				139416.74				10665.38					
2108 Mullen Turnpike				5 Medicare wages and tips				6 Medicare tax withheld					
Jonathanport MD 35712-2254				191489.13				5553.18					
				7 Social security tips				8 Allocated tips					
					13941		191489.13						
d Control number					Advance EIC	payment		10	Depende	ent care be	enefits		
3168999										187			
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12					
Charles Long				156				P 7497					
				13 Stat			-party	12b	1				
79316 Smith Estates Apt. 098					nidyee p	lan sick j	Jay		P	642			
Lake Shannon CT 22921-1932					Other (see enclosed Notice to Employee)				i				
									P :	120			
							12d						
									H .	558			
f Employee's address and ZIP of	ode								<u> </u>				
15 State Employer's state ID	number	16 State wages, tips, etc.	17 State income tax	•	18 Local v	ages, tips, etc.	19 L	ocal inco	me tax		20 Locality name		
MD 677-3	0-881	84033.85	8279.28		12766	54.02	29	289.	7		Wright Mills		
OR 864-7	7-218	87648.52	6691.68		12163	37.26	32	854.	93		Kerry Canyon		

Wage and Tax

Form W-2 Statement

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									
S	TATEMENT	4.	51-60-1661	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 Wages, tips, other compensation					2 Federal income tax withheld					
15-5774132						167345.19				18785.85				
c Employer's name, address, and ZIP code						3 Social security wages					4 Social security tax withheld			
Adams, Reyes and Vega Ltd					139416.74					10665.38				
2108 Mullen Turnpike				5 Medicare wages and tips					6 Medicare tax withheld					
Jonathanport MD 35712-2254					191489.13					5553.18				
					7 Social security tips					8 Allocated tips				
					139416.74					191489.13				
d Control number					9 Advance EIC payment					10 Dependent care benefits				
3168999										187				
e Employee's first name and initial Last name					11 Nonqualified plans					12a See instructions for box 12				
Charles Long					156					P 7497				
					13 Statutory Retirement Third-party employee plan sick pay					12b		Ī		
79316 Smith Estates Apt. 098											P	642		
Lake Shannon CT 22921-1932					14 Other (see enclosed Notice to Employee)				ree)	12c		1		
											P	120		
									12d					
										н 558				
f Employee's address and ZIP code														
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		10 2000 110 300, 110 110 110				D Local income tax			20 Locality name	
MD	677-30	-881	84033.85	8279.28		127664.02 29			292	9289.7			Wright Mills	
OR	864-77	-218	87648.52	6691.68		121637.26 32			328	2854.93			Kerry Canyon	

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

