REISSUED a Employee's social security number			Safe,	Accurate,	e n	A H C	Visit the	IRS Website		
STATEMENT 784-44-1306	OMB No.	1545-00	D8 FAST	! Use	G	file	at www.	irs.gov/efile.		
b Employer identification number		1 W	ages, tips, other	compensation		2 Fed	eral income ta	x withheld		
50-7001061			220131.77				35390.32			
c Employer's name, address, and ZIP code			3 Social security wages				4 Social security tax withheld			
Flores Ltd Ltd			273053.53				20888.6			
580 Berry Hollow Rollinsville ME 25260-9661			5 Medicare wages and tips				6 Medicare tax withheld			
			212687.97				6167.95			
			7 Social security tips				8 Allocated tips			
			273053.53			212687.97				
d Control number		9 A	dvance EIC paym	ent		10 Dep	endent care b	enefits		
8156495							105			
e Employee's first name and initial Last name		11 N	onqualified plans			12a See	instructions	for box 12		
Justin Woodward			173			P 8603				
			13 Statutory Retirement Third-party			12b				
548 Nicholas Causeway Apt. 876			yee plan	sick pay			539			
Bryanthaven MA 36281-9058		14 0	ther (see enclose	d Notice to Employ	ree)	12c				
Bryanthaven MA 30201-9030						Р	771			
						12d	7 7 1			
							654			
f Employee's address and ZIP code	17 State income tax	1	40	4:4-	10.1-	!:	4	20		
			18 Local wages	•		cal income		20 Locality name		
NY 206-47-326 104626.29 7	7711.69		197000.	12	308	350.0	Τ	Joseph Passage		
IL 534-21-503 103658.07	6158.45		253955.	62	414	106.4		Peterson Circle		

Wage and Tax **Statement**

Form W-2

5070

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.

R	REISSUED	a Employee's soc	ial security number		This information is being furnished to the Internal Revenue Service. If you are required						
ST	TATEMENT	7	84-44-1306	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				
50-7001061			220131.77			35390.32					
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Flores Ltd Ltd			273053.53			20888.6					
580 Berry Hollow			5 Medicare wages and tips			6 Medicare tax withheld					
Rollinsville ME 25260-9661			212687.97				6167.95				
			7 Social security tips			8 Allocated tips					
			273053.53			212687.97					
d Control number			9 Advance EIC payment			10 Dependent care benefits					
8156495						105					
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Justin Woodward			173			P 8603					
			13 Statutory Retirement Third-party			12b					
548 Nicholas Causeway Apt. 876			emp	oyee plan sick pay				539			
Bryanthaven MA 36281-9058			14 Other (see enclosed Notice to Employee)			12c					
						P	771				
							ŀ	12d		–	
						654					
	yee's address and ZIP coo		T	T.= 2		1					1
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		· · · · · · · · · · · · · · · ·		Local income tax			20 Locality name
NY	206-47	7-326	104626.29	7711.69		197000.15	30	850	.01		Joseph Passage
IL	534-21	L-503	103658.07	6158.45		253955.62	41	406	. 4		Peterson Circle

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

