F	REISSUED	a Employee's soci	al security number			Safe, Ac	curate,	20	A H C	Visit the	IRS Website
S	TATEMENT	7:	54-97-3033	OMB N	o. 1545-000	98 FAST! U	Jse	G^{γ}	file)	at www.i	rs.gov/efile.
b Employer identification number					1 W	1 Wages, tips, other compensation			Federal income tax withheld		
73-2296703						60478.8			21640.22		
c Employer's name, address, and ZIP code					3 Sc	3 Social security wages			4 Social security tax withheld		
Phelps Inc Inc						46052.28			3523.0		
378 Taylor Branch Suite 077									6 Medicare tax withheld		
_					58899.73				1708.09		
	West Thomasbury AR 14614-0219					7 Social security tips			8 Allocated tips		
						46052.28			58899.73		
d Control number					9 Ad	9 Advance EIC payment			10 Dependent care benefits		
732098									123		
e Employee's first name and initial Last name					11 Nonqualified plans 12a See			12a See in	instructions for box 12		
					243				4550		
Ashley Wood				13 Statutory Retirement Third-party employee plan sick pay				12b	1		
09200 Daniel Port Apt. 393					emplo	yee plan	sick pay		D	557	
West Susan GA 31949-3847					14 Ot	ther (see enclosed N	otice to Employe	ee)	12c	ı	
Mede dubum dir 31313 3017									270		
									12d		
									E	998	
f Emplo	ovee's address and ZIP cod	le.						H		730	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	<u>'</u>	18 Local wages, tips	s, etc.	19 Lo	ocal income ta	(20 Locality name
MT	862-32	-971	28357.57	1751.05		74930.62 1		120	2028.54		Greene Valley
MO	972-39	-237	28055.5	1648.31		71758.33		771	L2.52		Smith Harbors
Wage and Tax Department of the TreasuryInternal Revenue Service											

Wage and Tax

Statement Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

5070

Cut here. Keep lower portion for your records.

	REISSUED STATEMENT a Employee's social security number This information is being furnished to the Internal Revenue Service. If you a to file a tax return, a negligence penalty or other sanction may be imposed of this income is taxable and you fail to report it.									
b Employer identification number 73–2296703				1 Wages, tips, other compensation 60478.8			2 Federal income tax withheld 21640.22			
c Employer's name, address, and ZIP code Phelps Inc Inc					3 Social security wages 46052.28			4 Social security tax withheld 3523.0		
378 Taylor Branch Suite 077					5 Medicare wages and tips 58899.73			6 Medicare tax withheld 1708.09		
West Thomasbury AR 14614-0219				7 Social security tips 46052.28			8 Allocated tips 58899.73			
	d Control number 732098				9 Advance EIC payment			10 Dependent care benefits 123		
e Employee's first name and initial Last name				11 Nonqualified plans 243			12a See instructions for box 12 4550			
Ashley Wood 09200 Daniel Port Apt. 393 West Susan GA 31949-3847				13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			12b			
							D 557			
f Employee's address and ZIP code					1				1	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	1	Local income tax	:	20 Locality name	
MT	862-32-971	28357.57	1751.05		74930.62	12	2028.54		Greene Valley	
MO	972-39-237	28055.5	1648.31		71758.33	77	12.52		Smith Harbors	

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

