RE	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website		
ST	ATEMENT	21	.5-66-8612	OMB N	o. 1545-00	008 FAST! Use		~file	at www.ir	s.gov/efile.	
<b>b</b> Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld			
56-5500352					74572.13			17941.82			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld		
Perez PLC and Sons					66113.97			5057.72			
5862 Brent Rue New Tina DC 14613-2529					5 Medicare wages and tips			6 Medicare tax withheld			
						65184.83		1890.36			
IN	iew Tina D	C 146	13-2329		7 Social security tips			8 Allocated tips			
					66113.97			65184.83			
d Control	number				9 Advance EIC payment			10 Dependent care benefits			
274671									207		
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
_					280			E 3536			
William Hogan					13 Statutory Retirement Third-party employee plan sick pay			12b	1		
348 Harry Fork Suite 973 South Olivia NV 34903-9673					employee plan sick pay  X  14 Other (see enclosed Notice to Employee)			Н	397		
								12c	i		
									323		
				1			12d				
									714		
									714		
15 State	ee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	<u>.                                    </u>	18 Local wages, tips, et	c. 19	Local income ta	ıx	20 Locality name	
IA	938-99		36163.43	3030.61		61296.46		780.15		Laura Mission	
VA	357-45	-660	37472.12	3138.0		70650.38	85	525.58		Young Squares	

Wage and Tax

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

5070

Department of the Treasury--Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

R	EISSUED	a Employee's socia	al security number	This information is being furnished to the Internal Revenue Service. If you are requir to file a tax return, a negligence penalty or other sanction may be imposed on you if							
ST	TATEMENT 215-66-8612 OMB No. 1545-0008 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.						e imposed on you ii				
<b>b</b> Employ	b Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld		
56-5500352					74572.13			17941.82			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld		
Perez PLC and Sons					66113.97			5057.72			
5862 Brent Rue New Tina DC 14613-2529					5 Medicare wages and tips 65184.83			6 Medicare tax withheld 1890.36			
											7 Social security tips
					66113.97			65184.83			
					<b>d</b> Control	d Control number					9 Advance EIC payment
2	274671							207			
e Employ	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12		
_						280			E 3536		
,	William Hogan				13 Statutory Retirement Third-party			12b	1		
:	348 Harry Fork Suite 973					employee plan sick pay			397		
South Olivia NV 34903-9673					14 Other (see enclosed Notice to Employee)			12c			
•	South Offvia NV 54903-9075								323		
									12d		
									714		
f Employee's address and ZIP code  15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax						140 1 1 4	40.1	ocal income ta		20	
15 State	Employer's state ID no		16 State wages, tips, etc.			18 Local wages, tips, etc.			x	20 Locality name	
IA	938-99	9-924	36163.43	3030.61		61296.46	97	80.15		Laura Mission	
VA	357-45	5-660	37472.12	3138.0		70650.38		3525.58		Young Squares	

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

