REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website				
STATEME	NT 5:	32-67-2019	OMB No	o. 1545-0	008 FAST	Use	6	ile	at www.ii	rs.gov/efile.	
b Employer identification number			1 Wages, tips, other compensation				2 Federal income tax withheld				
92-0684730			121548.51				31635.83				
c Employer's name, address, and ZIP code			3 Social security wages			4	4 Social security tax withheld				
Alvarez Inc and Sons			102659.75				7853.47				
3905 Day Mountain			5 Medicare wages and tips			6	6 Medicare tax withheld				
South Amberton NM 80525-3189				113262.85				3284.62			
South Amberton NM 80525-3189			7 Social security tips			8	8 Allocated tips				
					102659.75			113262.85			
d Control number			9 Advance EIC payment			10	10 Dependent care benefits				
2402390							133				
e Employee's first name and initial Last name			11 Nonqualified plans			12	12a See instructions for box 12				
Amber Harris			165				5890				
			13 Statutory Retirement Third-party employee plan sick pay			12	12b				
537 Nichols Brooks Suite 543			emp	loyee plan	sick pay			967			
Antho	nyfort SC	70824-0925		14 (	Other (see enclosed	Notice to Emplo	yee) 12	С	1		
									672		
							12	d			
								E	639		
f Employee's address	and ZIP code								1		
15 State Employer	's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages,	tips, etc.	19 Loca	income ta	(	20 Locality name	
MT	L76-74-031	60716.78	4089.06		113475.	85	1974	6.58		White Gardens	
CA 2	298-77-165	61439.2	6319.93		130469.	34	2020	3.81		Turner Ports	

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.

REISSUED	a Employee's soc	ial security number			This information is being furnis						
STATEMENT	5	32-67-2019	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				
92-0684730				121548.51			31635.83				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Alvarez Inc and Sons				102659.75			7853.47				
3905 Day Mountain				5	Medicare wages and tips	6 Medicare tax withheld					
				113262.85			3284.62				
South Amberton NM 80525-3189					7 Social security tips			8 Allocated tips			
					102659.75			113262.85			
d Control number				9 Advance EIC payment			10 Dependent care benefits				
2402390								133			
Employee's first name and initial     Last name				11 Nonqualified plans			12a See instructions for box 12				
Amber Harris 537 Nichols Brooks Suite 543 Anthonyfort SC 70824-0925				165  13 Statutory Retirement Third-party sick pay X  14 Other (see enclosed Notice to Employee)			5890				
								967			
							12c				
								672			
							12d				
							E 639				
f Employee's address and ZIP c I5 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10	Local income tax	,	20 Locality name		
	4-031	60716.78	4089.06		10 = 2000 Hoger, app, 2001		9746.58		1		
MT 1/6-/	4-031	00/10./8	4009.00		1134/5.85	19	740.38		White Garden		
CA 298-7	7-165	61439.2	6319.93		130469.34	20	203.81		Turner Port		

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

