	OOLD	a Employee's socia	Security number	OMB N	o. 1545-00	Safe, Acc	103	e~file		IRS Website irs.gov/efile.		
	EMENT	, ,	77 47 2030	OIND IV				2 50		ŭ .		
b Employer identification number						1 Wages, tips, other compensation			2 Federal income tax withheld			
92-7529363						89912.75			27573.79			
' '	ame, address, and 2				3 Social security wages				1 Coolai coodiny tax maniola			
Suarez-Duke Ltd					116588.24				8919.0			
3438 Reginald Landing Suite 400					5 N	ledicare wages and tips		6 Me				
						96368.23			2794.68			
Por	Port Danielbury SC 27307-8885					ocial security tips		8 All	8 Allocated tips			
					116588.24				96368.23			
d Control number					9 Advance EIC payment			<b>10</b> De	10 Dependent care benefits			
8546262									178			
e Employee's first name and initial Last name					11 Nonqualified plans			12a Se	12a See instructions for box 12			
Jessica Robinson 7560 Daniel Burg West William UT 94010-8983					280				5807			
					13 Statutory Retirement Third-party			12h	12b			
					emplo		sick pay	125	109			
					14 C	ther (see enclosed Not	ce to Employe	e) 12c	l			
									100			
					ļ			40.1	183			
								12d	1			
									237			
f Employee's a	ddress and ZIP cod	е							l .			
15 State En	nployer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips,	etc.	19 Local incom	e tax	20 Locality name		
TN	044-31	-280	42386.21	4324.62		112850.67		16638.8	6638.81 Megan Vil			
WA	572-11	-731	48394.78	3076.48		99221.0	!	9083.85	5	Eddie Row		

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement

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 socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	75	57-47-2898	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			Federal income tax withheld			
92-7529363						89912.75			27573.79		
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld		
Suarez-Duke Ltd					116588.24			8919.0			
3438 Reginald Landing Suite 400 Port Danielbury SC 27307-8885					5 Medicare wages and tips 96368.23			6 Medicare tax withheld 2794.68			
											7 Social security tips
										116588.24	
d Control number					9 Advance EIC payment			10 Dependent care benefits			
	8546262							178			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12		
						280			5807		
	Jessica Robinson				13 Statutory Retirement Third-party			12b			
7560 Daniel Burg					emp	oyee plan sick pay			109		
	West William UT 94010-8983					14 Other (see enclosed Notice to Employee)			12¢		
									183		
								12d	l		
									237		
f Employee's address and ZIP code											
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		_ocal income tax		20 Locality name	
TN	044-31	L-280	42386.21	4324.62		112850.67 16		6638.81		Megan Villages	
WA	572-11	L-731	48394.78	3076.48		99221.0	90	83.85		Eddie Row	

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

