REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website								
STATEMENT 283-38-4064	OMB No	. 1545-00	08 FAST! Us	e	57 IL	le)	at www.irs.gov/e	file.		
b Employer identification number		1 V	ages, tips, other compe	ensation	2	Federal	income tax withheld			
11-0318258			53212.65				10568.32			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Wilson and Sons Group			40105.42			3068.06				
546 Patty Roads Apt. 561			5 Medicare wages and tips				6 Medicare tax withheld			
New Joshuatown RI 02327-7027	43044.59				1248.29					
New Joshuatown RI 02327-7027		7 Social security tips			8	8 Allocated tips				
			40105.42				43044.59			
d Control number		9 A	dvance EIC payment		10	Depend	lent care benefits			
1008395						130				
e Employee's first name and initial Last name		11 N	onqualified plans		12a	See ins	structions for box 1	2		
			107			G 8973				
Chloe Johnson			13 Statutory Retirement Third-party							
067 Yvonne Estate Suite 048	employee plan sick pay				223					
Weekhandhaank KO OCOOF OOOO			ther (see enclosed Notice	ce to Employee	e) 12c					
Hubbardburgh KS 26835-2289						D 202				
					12d	P	293			
					120					
							161			
f Employee's address and ZIP code										
15 State Employer's state ID number 16 State wages, tips, etc.	17 State income tax	3.7, 1.7			ocal income tax		ality name			
VA 336-98-530 25364.17	1797.71	58641.03 53		5375.	375.04		ew Fords			
NJ 323-80-150 27722.51	1752.03		41971.4	(6762.	21	Richa	rd Terrace		

Wage and Tax Statement

Form W-2

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.

REIS	SSUED	a Employee's soci	al security number			This information is being furnis					
STAT	EMENT	28	33-38-4064	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				Wages, tips, other compensation			2 Federal income tax withheld				
11-0318258				53212.65			10568.32				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Wilson and Sons Group			40105.42			3068.06					
546 Patty Roads Apt. 561 New Joshuatown RI 02327-7027				5 Medicare wages and tips			6 Medicare tax withheld				
					43044.59		1248.29				
				7 Social security tips			8 Allocated tips				
					40105.42		43044.59				
d Control num	nber				9 A	dvance EIC payment	1	0 Depen	dent care b	enefits	
10	08395								130		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Chloe Johnson				13 Statu			G 8973				
067 Yvonne Estate Suite 048 Hubbardburgh KS 26835-2289			employee plan sick pay 14 Other (see enclosed Notice to Employee)			223					
						12c					
						P 293					
							-	I2d			
								161			
1 . 7	address and ZIP cod mployer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10 1 00	al income ta:	,	20 Locality name	
			= ' ' '					5375.04		,	
VA	336-98	-530	25364.17	1797.71		58641.03	23/	J.U4		Matthew Fords	
NJ	323-80	-150	27722.51	1752.03		41971.4	676	2.21		Richard Terrace	

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

