REISSUED a Employee's social	security number		Safe, Accurate, Visit the IRS Website							
STATEMENT 48	8-98-7333	OMB No	o. 1545-00	08 FAST! Us	se 🔍	<i>5</i> ~ III	e	at www.ir	s.gov/efile.	
b Employer identification number			1 V	Vages, tips, other comp	ensation	2	Federal i	income tax	withheld	
74-0886308				195457.31			60643.19			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Curtis-Silva Ltd			245014.11			1	18743.58			
9791 April Mountains Apt. 514 Hudsonton AK 67847-1657			5 Medicare wages and tips			6				
			142709.26				4138.57			
			7 Social security tips				8 Allocated tips			
				245014.11				1427	09.26	
d Control number			9 A	dvance EIC payment		10	Depende	ent care be	nefits	
3284786							278			
e Employee's first name and initial Last name			11 N	lonqualified plans		12a	See inst	tructions f	or box 12	
Taranh Barral da			214				н 5088			
Joseph Reynold	S		13 Statut		Third-party sick pay	12b				
099 Kevin Forks			empic	yee pan	SICK Pay		P	498		
Sarahberg MT	95357-0134		14 C	Other (see enclosed Not	ice to Employe	e) 12c	ı			
							P	951		
						12d	1			
							D	415		
f Employee's address and ZIP code				T						
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips,		19 Local inc			20 Locality name	
PA 397-49-200	96566.01	5170.02		234268.15		19955	.89		Hernandez Crescent	
OR 731-71-184	89793.77	5955.83		227887.78		31720	. 88		Megan Mews	

Wage and Tax Statement 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.

	ISSUED		cial security number	OMPINI	This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if						
	ATEMENT	4	88-98-7333	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld				
74-0886308				195457.31			60643.19				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Curtis-Silva Ltd				245014.11			18743.58				
9791 April Mountains Apt. 514				5 Medicare wages and tips			6 Medicare tax withheld				
Hudsonton AK 67847-1657			142709.26			4138.57					
Hudsonton AR 6/84/-165/				7 Social security tips			8 Allocated tips				
				245014.11			142709.26				
d Control n	number				9 /	Advance EIC payment		10 Depen	dent care b	enefits	
3	284786								278		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Joseph Reynolds			214			н 5088					
			13 Statutory Retirement Third-party employee plan sick pay			12b	ı				
099 Kevin Forks						P					
Sarahberg MT 95357-0			95357-0134			14 Other (see enclosed Notice to Employee			12c		
541411501g 111 50007 0101				!			P	P 951			
							İ	12d			
							D	415			
	e's address and ZIP co					<u></u>	[
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income ta		20 Locality name	
PA	397-49	9-200	96566.01	5170.02		234268.15	19	955.89		Hernandez Crescent	
OR	731-71	L-18 4	89793.77	5955.83		227887.78	31	720.88		Megan Mews	

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

