R	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website						IRS Website		
ST	ATEMENT	20	5-60-9597	OMB N	o. 1545-	8000	FAST! Us	e ·	5~ I	ile	at www.i	rs.gov/efile.	
b Employe	er identification number				1	1 Wages, tips, other compensation				2 Federal income tax withheld			
3	37-7002841				193886.81					53178.67			
c Employe	c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Diaz, Wilson and Hunt and Sons					180129.05					13779.87			
5192 Lori Junctions					5 Medicare wages and tips				6	6 Medicare tax withheld			
				231990.12					6727.71				
"	Smithhaven TX 69215-1653				7 Social security tips				8	8 Allocated tips			
					180129.05					231990.12			
d Control number				9 Advance EIC payment			10	10 Dependent care benefits					
5	5300448									220			
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12					
	_	_			118				G 6041				
ن	Jesse James 78216 Donna Bypass Suite 492 Traceytown NC 47233-6026					13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)							
-										н	905		
											303		
]										12c			
										E	266		
									12d	12d			
										G	275		
f Employee's address and ZIP code													
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips, e	etc.	19 Local i	ncome ta	(20 Locality name	
ID	407-45	-300	91761.63	8305.7		2346	60.87	:	29504	4.74		Nelson Gardens	
NE	580-26	-180	97720.81	9000.16		1655	57.36		3231:	1.3		Espinoza Grove	

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.

	REISSUED FATEMENT	a Employee's soc	OMB N	OMB No. 1545-0008 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 this income is taxable and you fail to report it.								
	b Employer identification number				1 \	Vages, tips, other compensation	2 Federal income tax withheld					
	37-7002841					193886.81			53178.67			
c Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Diaz, Wilson and Hunt and Sons					180129.05			13779.87				
5192 Lori Junctions					5 Medicare wages and tips			6 Medicare tax withheld				
						231990.12	6727.71					
	Smithhaven TX 69215-1653					Social security tips	8 Allocated tips					
						180129.05	231990.12					
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	5300448								220			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Jesse James					118			G 6041				
	78216 Donna Bypass Suite 492					13 Statutory Retirement Third-party employee plan sick pay			ı			
									н 905			
Traceytown NC 47233-6026					14 Other (see enclosed Notice to Employee)			12c	ì			
	Tracey town NC 47255 0020								266			
								12d	200			
									G 275			
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax						18 Local wages, tips, etc.	10	Local income tax		00 1		
15 State			16 State wages, tips, etc.			3, , , , ,			20 Locality name			
ID	407-45	-300	91761.63	8305.7		234660.87	29	504.74		Nelson Gardens		
NE	580-26	-180	97720.81	9000.16		165557.36	32	2311.3		Espinoza Grove		

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

