REISSUED	a Employee's soci	•			Safe	, Accurate,	e D	zGHI		/isit the	IRS Website
STATEMENT	8	03-09-5301	OMB N	lo. 1545-0	008 <b>FAS</b>	T! Use			<i>3</i>	at www.ii	rs.gov/efile.
<b>b</b> Employer identification num	per			1	1 Wages, tips, other compensation			Federal income tax withheld			
31-4885960					224720.92			43581.61			
c Employer's name, address, and ZIP code				3	3 Social security wages			4 Social security tax withheld			
Smith-Lane Inc					264500.84			20234.31			
33218 Mark Trail Suite 785 East Stevenville WV 84320-4906				5 Medicare wages and tips				6 Medicare tax withheld			
				232332.17				6737.63			
				7 Social security tips				8 Allocated tips			
					264500.84			232332.17			
d Control number				9	Advance EIC payr	nent		<b>10</b> D	•	nt care be	enefits
1442397										163	
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12			
Eric Cannon				242				5065			
				13 Statutory Retirement Third-party employee plan sick pay				12b			
32845 Sarah Mills				emp	oloyee plan	sick pay		]	P !	534	
South Matthew NJ 27315-6796				14	14 Other (see enclosed Notice to Employee)			12c			
								,	.	127	
							E 137				
								ızu	1		
								1	H 4	458	
f Employee's address and ZI											
15 State Employer's state		16 State wages, tips, etc.	17 State income tax		18 Local wages	• • •		ocal incor			20 Locality name
RI 306-	85-393	113117.4	9605.33		212486	. 18	345	594.	19		Lawson Extensions
IL 516-	46-003	115188.45	8385.78		226182	. 34	254	149.	66		Julie Square

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	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
STATEMENT	80	03-09-5301	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			
31-4885960				224720.92			43581.61			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Smith-Lane Inc				264500.84			20234.31			
33218 Mark Trail Suite 785				5 Medicare wages and tips			6 Medicare tax withheld			
East Stevenville WV 84320-4906				232332.17			6737.63			
				7 Social security tips			8 Allocated tips			
				264500.84			232332.17			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
1442397							163			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Eric Cannon				242			5065			
				13 Statu			12b			
32845 Sarah Mills				empl	pyee plan sick pay		P	534		
South Matthew NJ 27315-6796				14 Other (see enclosed Notice to Employee)			12c			
			E				137			
							12d	ı		
								H 458		
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. 19		_ocal incom	e tax	20 Locality name	
RI 306	-85-393	113117.4	9605.33		212486.18 3		594.1	.9	Lawson Extensions	
IL 516	-46-003	115188.45	8385.78		226182.34	25	449.6	6	Julie Square	

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

