F	REISSUED	a Employee's socia	•			Saf	e, Accurate,	RS A	zeH.		e IRS Website		
S	TATEMENT	74	15-59-9483	OMB N	lo. 1545-0	008 <b>FAS</b>	ST! Use	J		at www	.irs.gov/efile.		
b Employer identification number					1	1 Wages, tips, other compensation			2 Federal income tax withheld				
15-6907929						133588.26				13806.38			
<b>c</b> Emplo	oyer's name, address, and 2	ZIP code			3	3 Social security wages				4 Social security tax withheld			
Irwin, Peterson and Willis Ltd					99024.77				7575.39				
822 Mathis Camp Suite 506 Woodsstad MA 55677-1695					5 Medicare wages and tips				6 Medicare tax withheld				
					149548.77 7 Social security tips				4336.91  8 Allocated tips				
					99024.77				149548.77				
d Control number					9				10 Dependent care benefits				
3805747									203				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
					228				5997				
	Mary Acosta					13 Statutory Retirement Third-party employee plan sick pay				12b			
391 Andre Burgs Suite 139 Lake Sarahhaven ID 64198-1755					X Dither (see enclosed Notice to Employee)				621				
									12c				
								779					
					İ				12d				
									D	824			
	yee's address and ZIP cod	е											
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wage	es, tips, etc.	19 Lo	ocal incom	e tax	20 Locality name		
MT	047-74	-245	70614.68	3301.73		104042.79 23		230	3018.18		Stephanie Rest		
NE	714-66	-255	72320.2	2897.87		164542	.79	204	491.4	1	Sean Mountains		

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.

F	REISSUED	a Employee's soci	al security number		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						
S	<b>TATEMENT</b>	7	45-59-9483	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>b</b> Emplo	b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld		
15-6907929					133588.26			13806.38			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Irwin, Peterson and Willis Ltd					99024.77			7575.39			
	822 Mathis Camp Suite 506					5 Medicare wages and tips			6 Medicare tax withheld		
Woodsstad MA 55677-1695					149548.77			4336.91			
					7 Social security tips			8 Allocated tips			
					99024.77			149548.77			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
	3805747								203		
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12		
	Manage Baselia					228			5997		
	Mary Acosta				13 Statutory Retirement Third-party employee plan sick pay			12b			
	391 Andre Burgs Suite 139 Lake Sarahhaven ID 64198-1755					14 Other (see enclosed Notice to Employee)			621		
									12c		
									779		
									12d		
									D 824		
f Employee's address and ZIP code											
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality name	
MT	047-74	1-245	70614.68	3301.73		104042.79	23	018.18		Stephanie Rest	
NE	714-66	6-255	72320.2	2897.87		164542.79	20	491.41		Sean Mountains	

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

