REISSUED a Employee's social sec	curity number			Safe, Accura	ite,		Visit the IRS Website
STATEMENT 011-	-53-9885	OMB No	. 1545-00	08 FAST! Use		≁file >	at www.irs.gov/efile.
b Employer identification number			1 V	ages, tips, other compensation	ation	2 Federal	l income tax withheld
10-2406178				111846.62		3912	5.13
c Employer's name, address, and ZIP code			3 S	ocial security wages		4 Social s	security tax withheld
Stewart-Johnson and So	ns			134252.29		1027	0.3
2753 Lopez Parkways Su	ite 499		5 N	ledicare wages and tips		6 Medica	re tax withheld
Joyceburgh VA	93753-1440			134009.77		0 411	3886.28
boyceburgii vii	33733 1110		7 S	ocial security tips		8 Allocate	134009.77
d Control number			9 A	dvance EIC payment		10 Depend	dent care benefits
7793349			3 /	uvance Lio payment		10 Depend	263
e Employee's first name and initial Last name			11 N	onqualified plans		12a See ins	structions for box 12
				295			7936
Kari Adams		•	13 Statu	ory Retirement	Third-party	12b	
663 Ashlee Divide			emplo	yee plan s	X pay		134
North Ann LA 09	369-0821		14 C	ther (see enclosed Notice t	to Employee)	12c	i
NOICH AIM IM 03303 0021							813
						12d	
							542
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	Local income tax	20 Locality name
IA 429-99-265 53	3106.48	3722.34	88240.63 13797.07 P		Perez Forest		
CT 584-30-972 60	0728.36	3553.74		141087.62	19	9440.27	Sanchez Lane

Wage and Tax Statement

Form W-2

5070

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.

REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
STATEMENT	0:	L1-53-9885	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					
10-2406178				111846.62			39125.13				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Stewart-Johnson and Sons				134252.29			10270.3				
2753 Lopez Parkways Suite 499				5 Medicare wages and tips			6 Medicare tax withheld				
Joyceburgh VA 93753-1440			134009.77 7 Social security tips			3886.28 8 Allocated tips					
				134252.29			134009.77				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
7793349							263				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Kari Adams				295			7936				
				13 Statu emple		12b	1				
663 Ashlee Divide				x		134					
North Ann	LA	09369-0821		14 Other (see enclosed Notice to Employee)			12c				
							813				
							12d				
							542				
f Employee's address and ZIP of											
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Local in		20 Locality name			
IA 429-9	9-265	53106.48	3722.34		88240.63	13797	7.07	Perez Forest			
CT 584-3	0-972	60728.36	3553.74		141087.62	19440	.27	Sanchez Lane			

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

