F	REISSUED	a Employee's socia	•				Safe, Accurate,	IRS:	1/G		Visit the	IRS Website	
S	TATEMENT	21	L5-42-9796	OMB N	o. 1545-0	800	FAST! Use			e	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation				2 Federal income tax withheld			
45-5606340						205061.69				22549.21			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Byrd and Sons and Sons						160188.82				12254.44			
704 Steve Square Suite 479					5 Medicare wages and tips				6 Medicare tax withheld				
North Jenniferstad WV 49617-3905					196664.52				5703.27				
	North Jenni	ierstad w	V 49617-3905		7 Social security tips				8 Allocated tips				
					160188.82				196664.52				
d Contro	ol number				9 Advance EIC payment			10 Dependent care benefits					
	5655793								276				
e Emplo	yee's first name and initial	Last name	•		11 Nonqualified plans			12a See instructions for box 12					
Mary Lyons					170			E 3094					
					13 Statutory Retirement Third-party				12b				
9581 Michele Glen Suite 549						employee plan sick pay				E			
Hardytown LA 09666-8839					14 Other (see enclosed Notice to Employee)				12c				
											880		
									12d				
										_	1		
										E	428		
	yee's address and ZIP cod		40.00-1	147 0000		140.1		140				00 1	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax			wages, tips, etc.		Local inc		(20 Locality name	
GA	384-12	-423	104324.69	9689.19		2036	29.52	36	731	.17		Rodriguez Harbor	
NV	NV 199-13-101 107693.18 9954.77			168423.83			32	32350.78			Myers Ridge		

Wage and Tax
Form W-2 Statement

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.

R	EISSUED	a Employee's socia	al security number								ice. If you are require		
ST	STATEMENT 215-42-9796 OMB N				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 comp	ensation	2	2 Federal income tax withheld				
45-5606340						205061.69				22549.21			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Byrd and Sons and Sons						160188.82				12254.44			
704 Steve Square Suite 479					5 N	gg				6 Medicare tax withheld			
North Jenniferstad WV 49617-3905						196664.52				5703.27			
						7 Social security tips				8 Allocated tips			
						160188.82				196664.52			
d Control	number				9 /	9 Advance EIC payment			10 Dependent care benefits				
5	5655793									276			
e Employ	ee's first name and initial	Last name	е		11 1	11 Nonqualified plans			12a See instructions for box 12				
						170 13 Statutory Retirement Third-party				E 3094			
Mary Lyons													
9581 Michele Glen Suite 549 Hardytown LA 09666-8839						X Sick pay X X 14 Other (see enclosed Notice to Employee)				E 119			
										12c			
										880			
										12d			
									177	420			
l										E 428			
f Employ 15 State	ree's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income ta	ax	18 Local wages, tips,	etc	19 Local i	ncome ta:	×	20 Locality name		
GA.	384-12		104324.69	9689.19		3, 1.,		3673		Rodriquez Harbo			
	304 12		101321.03	15005.15		203023.32		5075.	,		Rouliguez Harbo		
NV	199-13-101 107693.18 9954.77				168423.83			0.78	Myers Ridge				

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

