REISSUED		cial security number			Safe, A	ccurate,	ee 🖸	v.H		Visit the	IRS Webs	ite
STATEMENT	7	740-58-2328	OMB N	o. 1545-0	008 FAST!	Use	G		6	at www.i	rs.gov/efile) .
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld				
95-8336147				131727.39				42138.92				
c Employer's name, addres	ss, and ZIP code			3 Social security wages				4 Social security tax withheld				
Barnes, Frank and Matthews Group				114440.58				8754.7				
58227 Melanie Road Apt. 440				5 Medicare wages and tips				6 Medicare tax withheld				
North Lisa NM 58066-6775				96940.64 7 Social security tips				2811.28 8 Allocated tips				
d Control number				9 Advance EIC payment 10 Dependent care benefits								
7028244				204								
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12				
				119				5102				
Bradley Davis				13 Statutory Retirement Third-party				12b				
396 Susan Track				employee plan sick pay					E 440			
Erinfurt NC 87181-5199				14 Other (see enclosed Notice to Employee)				12c				
								367				
							-	12d				
									H	348		
f Employee's address and		The second second	T.= •		T						T	
15 State Employer's sta		16 State wages, tips, etc.	17 State income tax		3.,,,,,,			9 Local income tax			20 Locality	/ name
OH 997	7-48-698	63902.35	3175.53	158604.48 2		25	25541.57			Savage	Summit	
AK 015	5-79-196	66645.16	4212.77	93331.39		21	21210.11			Brian	Keys	

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 social security number						is being furnish							
STATEMENT 740-58-2328			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				1 Wages, tips, other compensation				2	2 Federal income tax withheld				
95-8336147				131727.39				4	42138.92				
c Employer's name, address, and	ZIP code			3 Social security wages				4	4 Social security tax withheld				
Barnes, Frank and Matthews Group				114440.58				8	8754.7				
58227 Melanie Road Apt. 440				5 Medicare wages and tips				6	6 Medicare tax withheld				
_				96940.64					2811.28				
North Lisa NM 58066-6775				7 Social security tips			8	8 Allocated tips					
				114440.58				96940.64					
d Control number				9 Advance EIC payment 10 Dependent care benefits						enefits			
7028244										204			
e Employee's first name and initial Last name				11 Nonqualified plans				12a	12a See instructions for box 12				
				119				5102					
Bradley Davis					tatutory	Retirement	Third-party	12b					
396 Susan Track				er	mployee	plan X	sick pay		E	440			
					Other (s		otice to Employe	ee) 12c					
Erinfurt NC 87181-5199				14	04.0. (0	00 011010000 111	one to Employ			1			
								367					
								12d		1			
									H	348			
f Employee's address and ZIP co	de												
15 State Employer's state ID r	umber	16 State wages, tips, etc.	17 State income tax		18 Lc	ocal wages, tips	s, etc.	19 Local in	come ta	х	20 Localit	y name	
OH 997-4	8-698	63902.35	3175.53	158604.48		25541	57		Savage	Summit			
			1010 ==										
AK 015-7	9-196	66645.16	4212.77		933	331.39		21210	.11		Brian	Keys	

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

