REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website				IRS Website			
STATEMENT 631-37-1902	OMB No. 1	1545-0008	FAST! Use		ile -	at www.ii	rs.gov/efile.		
b Employer identification number		1 Wage	s, tips, other compensation	2	Federa	al income tax	withheld		
27-1945180			100260.64			26783.0			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Mullins Group Group			82535.48			6313.96			
1285 Phillips Mountains Apt. 341			are wages and tips	6	6 Medicare tax withheld				
			7831.0		2547.1				
Brownbury NV 51728-8163			7 Social security tips			8 Allocated tips			
		82	2535.48			8783	1.0		
d Control number		9 Adva	nce EIC payment	10	Depen	dent care be	enefits		
6258210						286			
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12				
		242			8089				
Christopher Moore		13 Statutory	Retirement Third-pa	rty 12	b				
66166 Jennifer Square South Michaelside DE 55834-0733			employee plan sick pay 14 Other (see enclosed Notice to Employee)			852			
						1			
						223			
					12d				
					G	561			
f Employee's address and ZIP code						1			
15 State Employer's state ID number 16 State wages, tips, etc.	17 State income tax	18	Local wages, tips, etc.	19 Local	income ta:	x	20 Locality name		
MS 889-69-036 54280.7	2769.04	99	9406.72	1540	1.88		Villa Roads		
SC 455-53-208 49938.43	3834.78	1:	15260.35	1427	8.49		Chelsea Lock		

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 soci	al security number			This information is being furnish	hed to	the Internal Rev	enue Serv	ce. If you are required	
STATEMENT	6.	31-37-1902	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 n	ımber		•	1 V	/ages, tips, other compensation		Federal income tax withheld			
27-1945180			100260.64			26783.0				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Mullins Group Group			82535.48			6313.96				
1285 Phillips Mountains Apt. 341 Brownbury NV 51728-8163			5 Medicare wages and tips			6 Medicare tax withheld				
			87831.0			2547.1				
			7 Social security tips			8 Allocated tips				
			82535.48			87831.0				
d Control number			9 Advance EIC payment			10 Dependent care benefits				
6258210								286		
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12					
Christopher Moore			242			8089				
			13 Statu			12b	ı			
66166 Jennifer Square			emple	pyee plan sick pay			852			
South Michaelside DE 55834-0733			14 Other (see enclosed Notice to Employee)			12c				
							223			
		12d								
						G 561				
f Employee's address and									T	
15 State Employer's sta		16 State wages, tips, etc.	17 State income tax		3, , , .,		Local income tax		20 Locality name	
MS 88	9-69-036	54280.7	2769.04		99406.72 15		5401.88		Villa Roads	
SC 45	5-53-208	49938.43	3834.78		115260.35	14	278.49		Chelsea Lock	

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

