REIS	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website			
STAT	EMENT	66	5-08-5531	OMB N	o. 1545-0	0008 FAST! U	se	G [→] II	ie)	at www.i	rs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld				
23-3052632					92886.65				31926.22			
c Employer's r	name, address, and ZIP	code			3 Social security wages				4 Social security tax withheld			
Romero, Stein and Mckee Group				76248.63				5833.02				
019 Oliver Passage				5 Medicare wages and tips				6 Medicare tax withheld				
Lake David KY 43167-6921				91603.82				2656.51				
Lake David Ni 45107-0921					7 Social security tips			8	8 Allocated tips			
					76248.63				91603.82			
d Control number				9 Advance EIC payment 10 Dependent care be				enefits				
769	97224									243		
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
_					114				8487			
Jo	Jody Cook				13 Statutory Retirement Third-party							
1055 Ibarra Land Suite 279					employee plan sick pay				889			
New Bryan CO 50243-9769				14 Other (see enclosed Notice to Employee)			ee) 12c	12c				
New Bryan CO 30243-9769								122				
							12d	12d				
									P	442		
f Employee's	address and ZIP code											
15 State E	mployer's state ID numb	er	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips	etc.	19 Local in	come tax		20 Locality name	
NY	120-06-	564	48328.86	3092.26		71175.95		10298	298.77 Marilyn Meado		Marilyn Meadows	
PA	586-70-	782	50109.49	2535.07		74626.67		14833	. 58		Daniel Radial	

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 socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT	66	55-08-5531	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.						
	yer identification number			l	1 V	Vages, tips, other compensation	2 Federal income tax withheld				
23-3052632					92886.65			31926.22			
c Emplo	yer's name, address, and 2	ZIP code			3 Social security wages			4 Social security tax withheld			
Romero, Stein and Mckee Group					76248.63			5833.02			
019 Oliver Passage Lake David KY 43167-6921				5 Medicare wages and tips			6 Medicare tax withheld				
				91603.82			2656.51				
				7 Social security tips			8 Allocated tips				
				76248.63			91603.82				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
	7697224							243			
e Emplo	e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Jody Cook 1055 Ibarra Land Suite 279				114			8487				
				13 Statutory Retirement Third-party			12b				
				employee plan sick pay			889				
	New Bryan CO 50243-9769				14 Other (see enclosed Notice to Employee)			12c			
New Bryan CO 30243-9709							122				
								12d			
									1		
								P 442			
f Employee's address and ZIP code					T				1		
15 State	Employer's state ID nu				3, , , , , ,		9 Local income tax 20 Locality name				
NY	120-06	5-564	48328.86	3092.26		71175.95 1		.0298.77		Marilyn Meadows	
PA	586-70-782 50109.49 2535.07		74626.67		14	833.58	Daniel Radial				

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

