R	REISSUED a Employee's social security number			Safe, Accurate, WB No. 1545-0008 FAST! Use RESPUBLIES At www.irs.gov/efile										
ST	STATEMENT 264-53-7040 OMB N			MB No. 1545-0	0008 FAST!	Jse 🔍	5~ III	6	at www.ir	s.gov/efile.				
b Employer identification number						1 Wages, tips, other compensation			Federal income tax withheld					
22-3833880						123530.0			44447.43					
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld					
Dunn and Sons Group						147152.79			11257.19					
161 Dana Forge Jorgeton CO 10879-0628						5 Medicare wages and tips				Medicare tax withheld				
						160454.25				4653.17				
						7 Social security tips				8 Allocated tips				
						147152.79			160454.25					
d Control number						9 Advance EIC payment 10 Dependent care benefits				nefits				
	8304339								174					
e Employee's first name and initial Last name						11 Nonqualified plans			12a See instructions for box 12					
Heather Nelson 16864 Thomas Gateway South Jenniferfurt LA 71768						209			D 2622					
						13 Statutory Retirement Third-party employee plan sick pay								
						X				118				
					14	14 Other (see enclosed Notice to Employee)			Í					
									E	338				
									12d					
									н	295				
f Employee's address and ZIP code														
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income	e tax	18 Local wages, tip	s, etc.	19 Local inc	ome tax		20 Locality	name		
GA	213-72	-093	67391.22	3152.75	5	100842.9	7	16054	.06		Karen	Fall		
ND	813-30	-852	56628.86	2942.49)	117222.4	6	22147	.08		Butler	Spur		

Wage and Tax

Form W-2 Statement

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.

R	REISSUED a Employee's social security number				This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if								
S1	TATEMENT 264-53-7040 OM				this income is taxable and you fail to report it.								
b Employ	yer identification number	1 '	1 Wages, tips, other compensation			Federal income tax withheld							
22-3833880						123530.0			44447.43				
c Employer's name, address, and ZIP code					3	3 Social security wages			4 Social security tax withheld				
Dunn and Sons Group						147152.79			11257.19				
161 Dana Forge					5	5 Medicare wages and tips			6 Medicare tax withheld				
Jorgeton CO 10879-0628						160454.25	4653.17						
					7	7 Social security tips			8 Allocated tips				
						147152.79			160454.25				
d Control number					9 /	9 Advance EIC payment			10 Dependent care benefits				
	8304339								174				
e Employ	yee's first name and initial	Last name			11	11 Nonqualified plans			12a See instructions for box 12				
Heather Nelson 16864 Thomas Gateway South Jenniferfurt LA 71768						209			D 2622				
						13 Statutory Retirement Third-party employee plan sick pay			ı				
									118				
					14	14 Other (see enclosed Notice to Employee)			ı				
						!			E 338				
								12d					
									295				
f Employee's address and ZIP code									•				
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income ta	ıx	18 Local wages, tips, etc.	19	Local income tax		20 Locality	name		
GA	213-72	2-093	67391.22	3152.75		100842.97 1		16054.06		Karen	Fall		
ND	813-30)-852	56628.86	2942.49		117222.46	22	147.08		Butler	Spur		

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

