F	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website			
S	TATEMENT	22	24-09-5398	OMB N	lo. 1545-000	8 FAST! Use		**file	at www.	irs.gov/efi	le.	
b Employer identification number					1 W	1 Wages, tips, other compensation			Federal income tax withheld			
39-1798690						100541.63			20703.06			
c Emplo	yer's name, address, and 2	IP code			3 Sc	3 Social security wages			4 Social security tax withheld			
	Foley, Will	iams and	Stevens Group			114524.91			8761.16			
3115 Albert Mission						· · · · · · · · · · · · · · · · · · ·			6 Medicare tax withheld			
East Judith WY 47595-1976						113094.72			3279.75			
	East Judith	WI 4/3	93-1976			7 Social security tips			8 Allocated tips			
						114524.91			113094.72			
d Control number					9 Ac	9 Advance EIC payment			10 Dependent care benefits			
1760576								213				
e Emplo	yee's first name and initial	Last name	Э		11 No	11 Nonqualified plans			12a See instructions for box 12			
						273			P 7188			
Matthew Guerrero					13 Statutory Retirement Third-party employee plan sick pay			1				
2551 Robert Glens East Vanessa AK 44908-6546					employ				P 847			
					14 Ot	her (see enclosed Notice to Er	nployee)	12c	ĺ			
							G	142				
								12d				
									907			
f Emplo	yee's address and ZIP cod	Δ.							307			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	1	18 Local wages, tips, etc.	19	Local income to	ax	20 Local	lity name	
MS	726-30	-536	45858.85	4569.65		118390.96	1'	7816.88		Kathy	Street	
NM	810-77	-422	54267.51	2972.42		130214.98	1	4499.38		Toni	Inlet	
Wage and Tax					Department of the TreasuryInternal Revenue Service							
Form W	Ctatam			ムロア	U	20,			,			

Statement Form W-2 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 soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
S	TATEMENT	2:	24-09-5398	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					Wages, tips, other compensation			2 Federal income tax withheld				
39-1798690					100541.63			20703.06				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Foley, Williams and Stevens Group					114524.91			8761.16				
3115 Albert Mission				5 Medicare wages and tips			6 Medicare tax withheld					
					113094.72			3279.75				
	East Judith WY 47595-1976					7 Social security tips			8 Allocated tips			
					114524.91			113094.72				
d Control number					9 Advance EIC payment			10 Dependent care benefits				
	1760576								213			
e Emplo	yee's first name and initial	Last nam	е		11 Nonqualified plans			12a See instructions for box 12				
Matthew Guerrero				273			P 7188					
	Matchew Guerrero				13 Statutory Retirement Third-party employee plan sick pay			12b	i			
2551 Robert Glens East Vanessa AK 44908-6546								P	847			
					14 Other (see enclosed Notice to Employee)			12c				
								G 142				
							F	12d				
								907				
f Employee's address and ZIP code					T				T			
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax		20 Locality name		
MS	726-30)-536 	45858.85	4569.65		118390.96 1		.7816.88		Kathy Street		
NM	810-77	7-422	54267.51	2972.42		130214.98	14	499.38		Toni Inlet		

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

