REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website					
STATEMENT 809-74-0612	OMB N	o. 1545-0008 FA	ST! Use	E-tile	at www.irs.gov/efile.		
b Employer identification number	 Wages, tips, oth 	ner compensation	2 Fed	2 Federal income tax withheld			
74-3345962	218061	L.94	405	40540.79			
c Employer's name, address, and ZIP code	3 Social security v	vages	4 Soc	4 Social security tax withheld			
Shah, Nelson and Perez Group	175394	1.79		13417.7			
65596 Bell Overpass Apt. 239	5 Medicare wages	•	6 Med				
North Michele RI 79813-875	246741			7155.51			
Noith Michele Ki 79015 075	7 Social security to	•	8 Allo	8 Allocated tips			
	175394			246741.78			
d Control number	9 Advance EIC pa	ayment	10 Dep	10 Dependent care benefits			
3664850				168			
e Employee's first name and initial Last name		11 Nonqualified pla	ins	12a See	12a See instructions for box 12		
		287			1756		
Brandon Dunn	13 Statutory Retirements of the state of the	rement Third-party sick pay	12b	12b			
316 Mackenzie Throughway	X Plan	SICK Pay	P	P 923			
Kevinmouth MT 08815-1740	14 Other (see enclo	osed Notice to Employe	ee) 12c	i			
nevimoden mi 00013 1740			E	375			
				12d			
					464		
f Employee's address and ZIP code					303		
15 State Employer's state ID number 16 State wages, tips, etc.	c. 17 State income tax	18 Local wag	ges, tips, etc.	19 Local income	tax 20 Locality name		
NV 139-73-492 118220.49	7166.3	157348	3.45	33051.6	Monica Village		
SD 356-77-840 101983.23	7556.22	227202.79 4		41392.1	4 Jackson Manors		

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.

F	REISSUED a Employee's so	ocial security number		This information is being furnished to the Internal Revenue Service. If you are required						
_	IAIEMENI	809-74-0612	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			Federal income tax withheld				
74-3345962			218061.94			40540.79				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Shah, Nelson and Perez Group			175394.79			13417.7				
65596 Bell Overpass Apt. 239 North Michele RI 79813-8752			5 Medicare wages and tips 246741.78			6 Medicare tax withheld 7155.51				
									7 Social security tips	
			175394.79			246741.78				
			d Control number			9 Advance EIC payment			10 Dependent care benefits	
3664850						168				
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12					
Brandon Dunn			287			1756				
			13 State	tory Retirement Third-party oyee plan sick pay		12b	ı			
316 Mackenzie Throughway			X			P 923				
Kevinmouth MT 08815-1740			14 Other (see enclosed Notice to Employee)			12c	i			
						E 375				
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	oyee's address and ZIP code	To a second	T.= 2		T				T	
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	10 = 11 mag 10, np 1, 11 m					20 Locality name	
NV	139-73-492	118220.49	7166.3	157348.45 33		051.63	051.63 Monica Vill			
SD	356-77-840	101983.23	7556.22		227202.79	413			Jackson Manors	

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

