RI	EISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website				
ST	ATEMENT	72	26-65-2584	OMB N	o. 1545-0	008 FAS	ST! Use	G		a e	at www.ir	rs.gov/efile.
b Employer identification number					1 Wages, tips, other compensation				2 Federal income tax withheld			
48-5578798					213494.91				56818.46			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Walker-Wagner LLC					177927.96				13611.49			
0041 Joe Ferry Williamsmouth PA 08000-0494					5 Medicare wages and tips				6 Medicare tax withheld			
					200318.36				5809.23			
					7 Social security tips				8 Allocated tips			
					177927.96				200318.36			
d Control number					9 Advance EIC payment				10 Dependent care benefits			
4637650									278			
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12				
					204				G 8406			
E	Erik Ellis					13 Statutory Retirement Third-party employee plan sick pay						
40735 Samuel Burg Suite 069 Petersonburgh TN 59899-2276					X Sixx Pay				325			
					14 Other (see enclosed Notice to Employee)			yee)	12c			
									(g :	240	
									12d			
										8	848	
	ee's address and ZIP cod											
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wage			cal incor			20 Locality name
PA	985-19	-636	109290.45	11532.14		211419	. 58	304	131.	52		Jodi Crescent
MO	544-31	-040	99836.89	11862.91		202668	. 0	391	92.	25		Jessica Shoals

Wage and Tax Statement 5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement
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 soc	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT	7	26-65-2584	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 2 Federal income tax withheld					x withheld	
48-5578798					213494.91			56818.46			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Walker-Wagner LLC					177927.96			13611.49			
0041 Joe Ferry Williamsmouth PA 08000-0494					5	Medicare wages and tips	Medicare tax withheld				
						200318.36	5809.23				
					7 Social security tips			8 Allocated tips			
					177927.96			200318.36			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
4637650								278			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
				204			G 8406				
	Erik Ellis				13 Statutory Retirement Third-party			12b			
40735 Samuel Burg Suite 069 Petersonburgh TN 59899-2276					mployee plan sick pay X Other (see enclosed Notice to Employee)				325		
								12c			
								G	240		
							ŀ	12d	240		
								124	1		
								848			
f Employee's address and ZIP code											
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		10 ====================================		ocal income		20 Locality name	
PA	985-19	9-636	109290.45	11532.14		211419.58 3		0431.52		Jodi Crescent	
мо	544-31	-040	99836.89	11862.91		202668.0	39	192.2	5	Jessica Shoals	

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

