| REISSUED a Employee's soc | ial security number | | Safe, Accurate, Visit the IRS Website | | | | | IRS Website | | | |
|---|---------------------|--------------------|--|--|----------|-------------|---------------------------------|--------------------------------|------------------|--|--|
| STATEMENT 2 | 95-17-3419 | OMB No | o. 1545-00 | 08 FAST | ! Use | G ~1 | ile) | at www.ii | rs.gov/efile. | | |
| b Employer identification number | | | 1 Wages, tips, other compensation | | | | 2 Federal income tax withheld | | | | |
| 99-9468923 | | | 187237.76 | | | | 62606.68 | | | | |
| c Employer's name, address, and ZIP code | | | | 3 Social security wages | | | | 4 Social security tax withheld | | | |
| Nelson-Mcmahon Group | | | 178250.41 | | | | 13636.16 | | | | |
| 973 Joann Plaza Suite 744 | | | 5 Medicare wages and tips | | | 6 | | | | | |
| | | | 241813.33 | | | | 7012.59 | | | | |
| Alanville AZ 61447-2521 | | | 7 Social security tips | | | 8 | | | | | |
| | | | 178250.41 | | | | 241813.33 | | | | |
| d Control number | | | 9 Advance EIC payment | | | 10 | | | | | |
| 7646794 | | | | | | | 101 | | | | |
| e Employee's first name and initial Last name | | | 11 Nonqualified plans | | | 12a | 12a See instructions for box 12 | | | | |
| Kimberly Gray | | | 152 | | | | 4051 | | | | |
| | | | 13 Statutory Retirement Third-party employee plan sick pay | | | | 1 | 1 | | | |
| 29818 Walker Mill | | | empic | lyee pian | SICK Pay | | H | 751 | | | |
| South Alexandra VA 27128-0917 | | | | 14 Other (see enclosed Notice to Employee) | | | | | | | |
| South Alexandra VA 2/128-0917 | | | | | | | G | 843 | | | |
| | | | | | | | 12d | | | | |
| | | | | | | 120 | | l . | | | |
| | | | | | | | E | 751 | | | |
| f Employee's address and ZIP code | T | | | T | | | | | 1 | | |
| 15 State Employer's state ID number | 3,1,1,1,1 | 7 State income tax | | 18 Local wages, | · • | 19 Local i | | (| 20 Locality name | | |
| NE 622-29-216 | 99458.75 5 | 5410.54 | | 224842. | 19 | 3436 | 6.89 | | Herman Mountain | | |
| WA 498-47-449 | 88262.39 | 5296.9 | | 236828. | 16 | 2446 | 6.9 | | Karen 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.

| RE | ISSUED | a Employee's socia | al security number | | This information is being furnished to the Internal Revenue Service. If you are required | | | | | | | |
|---|----------------------------------|--------------------|----------------------------|--|---|---------------------------------|-------------------------|--------------------------------|-----------------------------|------------------|--|--|
| STA | TEMENT | 29 | 95-17-3419 | 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 | b Employer identification number | | | | 1 \ | | | | Federal income tax withheld | | | |
| 99-9468923 | | | | | 187237.76 | | | 62606.68 | | | | |
| c Employer's name, address, and ZIP code | | | | 3 3 | 3 Social security wages | | | 4 Social security tax withheld | | | | |
| Nelson-Mcmahon Group | | | | | 178250.41 | | | 13636.16 | | | | |
| 973 Joann Plaza Suite 744 | | | | 5 Medicare wages and tips | | | 6 Medicare tax withheld | | | | | |
| Alanville AZ 61447-2521 | | | | 241813.33 | 7012.59 | | | | | | | |
| | | | 7 Social security tips | | | 8 Allocated tips | | | | | | |
| | | | | 178250.41 | | | 241813.33 | | | | | |
| d Control number | | | | 9 / | 9 Advance EIC payment | | | 10 Dependent care benefits | | | | |
| 7646794 | | | | | | | | 101 | | | | |
| e Employee's first name and initial Last name | | | 11 Nonqualified plans | | | 12a See instructions for box 12 | | | | | | |
| Kimberly Gray | | | 152 | | | 4051 | | | | | | |
| | | | 13 Statu | | | 12b | 1 | | | | | |
| 29818 Walker Mill | | | emp | oyee plan sick pay | | Н | 751 | | | | | |
| South Alexandra VA 27128-0917 | | | 14 (| 14 Other (see enclosed Notice to Employee) | | | 12c | | | | | |
| | | | | | | G | 843 | | | | | |
| | | | | | | | 12d | | | | | |
| | | | | | | E | 751 | | | | | |
| f Employee's address and ZIP code | | | | | | | • | _ | | | | |
| | Employer's state ID no | | 16 State wages, tips, etc. | 17 State income tax | | 18 Local wages, tips, etc. | | Local income tax | | 20 Locality name | | |
| NE | 622-29 | 9-216 | 99458.75 | 5410.54 | | 224842.19 34 | | 34366.89 | | Herman Mountain | | |
| WA | 498-47 | 7-449 | 88262.39 | 5296.9 | | 236828.16 24 | | 466.9 | Karen 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

