R	REISSUED	a Employee's socia	ll security number			Safe, A	ccurate,			Visit the	IRS Website	
ST	FATEMENT	42	27-67-5071	OMB N	o. 1545-00	008 FAST!	Use	e √fi	16	at www.i	rs.gov/efile.	
b Employer identification number					1 \	1 Wages, tips, other compensation			Federal income tax withheld			
	54-0446468					221339.76			57757.74			
c Emplo	yer's name, address, and 2	ZIP code		-	3 Social security wages				4 Social security tax withheld			
Walter, Lewis and Williams Ltd					245310.96			1	18766.29			
54759 Bailey Keys Apt. 717					5 Medicare wages and tips				6 Medicare tax withheld			
	Tinahaven NM 98067-0518				283161.9				8211.7			
	Tinanaven NM 98007-0518					7 Social security tips			8 Allocated tips			
					245310.96				283161.9			
d Contro					9 Advance EIC payment			10				
6833097					<u> </u>				299			
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
	_				229				P 3634			
	Leroy Watkins 39347 Richard Park Apt. 250 Lambtown HI 46211-2346				13 Statutory Retirement Third-party sick pay X Statutory Plan Sick pay 14 Other (see enclosed Notice to Employee)							
									н 489			
111 40211 2540									н 993			
									12d			
									н	249		
f Employ	vee's address and ZIP cod	Δ.										
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	ļ	18 Local wages, tip	os, etc.	19 Local in	come tax	(20 Locality name	
NC	771-49	-720	104137.69	11305.45		240181.0	9	33465	.27		Samantha Drive	
MI	768-36	5-723	102356.86	11108.4		277860.3	1	24222	.19		Monica Creek	

Wage and Tax Statement

Form W-2

5070

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 social security number This information is being furnished to the Internal Revenue Service. If you are requ											
S	TATEMENT	4	27-67-5071	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 Emplo	b Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld			
54-0446468					221339.76			57757.74				
c Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Walter, Lewis and Williams Ltd					245310.96			18766.29				
	54759 Bailey Keys Apt. 717 Tinahaven NM 98067-0518					5 Medicare wages and tips			6 Medicare tax withheld			
						283161.9			8211.7			
						7 Social security tips			8 Allocated tips			
						245310.96			283161.9			
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	6833097				299							
e Emplo	yee's first name and initial	Last nan	ne		11 Nonqualified plans			12a See instructions for box 12				
	Leroy Watkins 39347 Richard Park Apt. 250				229 13 Statutory Retirement Third-party			P 3634				
					empl	oyee <u>plan</u> <u>sick p</u> ay		н	489			
Lambtown HI 46211-2346					14 Other (see enclosed Notice to Employee)			12c				
						1			н 993			
							-	12d				
									н 249			
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax						40 Landunger ting at	40.14	ocal income tax		20. Lassituassa		
			16 State wages, tips, etc.			10 = 100 magra, apa, 100				20 Locality name		
NC	771-49	9- 120	104137.69	11305.45	240181.09 33		334	3465.27		Samantha Drive		
MI	768-36	5-723	102356.86	11108.4		277860.31	242	222.19		Monica Creek		

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

