REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website					
STATEMENT 498-79-3207	OMB No. 1545-0	008 FAST! Use	at www.irs.gov/efi	le.			
b Employer identification number	1	Wages, tips, other compensation	2 Federal income tax withheld				
92-3769655		172201.45	49314.06	49314.06			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security tax withheld				
Moore Group Group		190520.69	14574.83				
400 Eric Junction Apt. 539	5	Medicare wages and tips	6 Medicare tax withheld				
Port Janethaven DC 20533-0599		214008.9		6206.26			
Port Janethaven DC 20555-0599	7	Social security tips	8 Allocated tips	8 Allocated tips			
		190520.69	214008.9				
d Control number	9	Advance EIC payment	10 Dependent care benefits				
2802061			135				
e Employee's first name and initial Last name	11	Nonqualified plans	12a See instructions for box 12				
		154	1562				
Leslie Rogers	13 Stat		12b				
12024 Brown Vista	emp	loyee plan sick pay	625				
Christyhaven NH 00699-3081	14	Other (see enclosed Notice to Employ	/ee) 12c				
chilbeyhaven km 00033 3001			G 122				
			12d				
			140				
C. Fredrick and Joseph 1710 and			1140				
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax 20 Local	ity name			
	10464.21	155319.57	07106 0	Orchard			
			 				
CT 034-27-104 93424.06	8685.64	189875.11	18636.67 Margaret	t Villages			

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.

RE	ISSUED	a Employee's soc	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
STA	TEMENT	4	98-79-3207	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					
92-3769655				172201.45			49314.06					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Moore Group Group				190520.69			14574.83					
400 Eric Junction Apt. 539				5 Medicare wages and tips			6 Medicare tax withheld					
-			214008.9			6206.26						
Port Janethaven DC 20533-0599				7 Social security tips			8 Allocated tips					
				190520.69			214008.9					
d Control number			9 Advance EIC payment			10 Dependent care benefits						
2802061							135					
e Employee's first name and initial Last name			11 Nonqualified plans 12a			12a See ins	See instructions for box 12					
Leslie Rogers 12024 Brown Vista			154 13 Statutory Retirement Third-party			1562						
				loyee plan sick pay		120						
				X			625					
Christyhaven NH 00699-3081				14 Other (see enclosed Notice to Employee)			12c					
								G	122			
							-	12d				
								140				
	e's address and ZIP coo		1	T.= 2		T				1		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax		20 Locality name		
MD	476-30	0-980	81981.07	10464.21		155319.57	27	106.3		James Orchard		
CT	034-27	7-104	93424.06	8685.64		189875.11	18	636.67		Margaret Villages		

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

