F	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website						IRS Website		
S	TATEMENT	35	50-08-3451	OMB N	o. 1545-	8000	FAST! Us	e		le)	at www.i	rs.gov/efile.	
b Employer identification number					1 Wages, tips, other compensation				2	2 Federal income tax withheld			
64-6017142						166585.12				48216.28			
c Employer's name, address, and ZIP code					3 Social security wages				4	4 Social security tax withheld			
Smith, Coleman and Roberts LLC					207620.7				1	15882.98			
5495 Ryan Fall Apt. 896 Schneiderland MD 73922-1165					5 Medicare wages and tips				6	6 Medicare tax withheld			
					165913.4					4811.49			
					7 Social security tips				8	8 Allocated tips			
					207620.7					165913.4			
d Contro					9 Advance EIC payment			10					
	8896456										236		
e Emplo	e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
					268					4191			
	Jimmy Griffin 86964 David Park Johnsonton MI 03730-5506				13 Statutory Retirement Third-party sick pay X 14 Other (see enclosed Notice to Employee)				12b				
										D	362		
									e) 12c	12c			
									,	600			
										692			
									12d	12d 			
										G	745		
f Employee's address and ZIP code													
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips,	etc.	19 Local in	come tax	:	20 Locality name	
SD	950-84	-393	91005.3	6428.76		1677	49.1	2	25322	.73		Luis Corners	
OK	371-92	-381	77063.33	7234.3		1977	24.71	;	32053	.14		Ashley Parkway	

Wage and Tax

Form W-2 Statement

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.

R	EISSUED	This information is being furnished to the Internal Revenue Service. If you are required											
SI	TATEMENT	3.	50-08-3451	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 Employ	b Employer identification number					Wages, tips, other compensation				2 Federal income tax withheld			
64-6017142						166585.12				48216.28			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Smith, Coleman and Roberts LLC						207620.7				15882.98			
5495 Ryan Fall Apt. 896						5 Medicare wages and tips				6 Medicare tax withheld			
Schneiderland MD 73922-1165					165913.4				4811.49				
					7 Social security tips				8 Allocated tips				
						207620.7				165913.4			
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits				
	8896456									236			
e Employ	e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12			
Jimmy Griffin					268				4191				
	·	13 Statutory Retirement Third-party employee plan sick pay				12b	ĺ						
	86964 David Park Johnsonton MI 03730-5506					<u> </u> <u>x</u>			D 362				
						14 Other (see enclosed Notice to Employee)				12c			
										692			
										12d			
									~	745			
									G	745			
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			19 17	9 Local income tax 20 Locality name					
	950-84-393		91005.3	6428.76		· · · · · · · · · · · · · · · · · · ·				•	1		
עפ	SD 950-84-393		31002.3	0428.78		10//49.1		253	25322.73		Luis Corners		
ок	OK 371-92-381		77063.33	7234.3		197724.71 32		320	053.14	Ashley Parkway			

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

