REISSUED a Employee's social security number					Safe, Accurate	), (Fe • )		Visit the IRS	Website	
STATE	MENT	304-39-4621	OMB N	o. 1545-0	DOS FAST! Use		≁file >	at www.irs.go	v/efile.	
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
26-0	400969				159174.23			18265.73		
c Employer's nam	c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld		
Stevens-Prince Group				171416.63			13113.37			
4789 Gilbert Ridges				5 Medicare wages and tips			6 Medicare tax withheld			
				160368.35			4650.68			
Briannamouth WA 14347-1779				7 Social security tips			8 Allocated tips			
				171416.63			160368.35			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
5227	873							235		
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Larry Williams				182			5245			
				13 Statutory Retirement Third-party employee plan sick pay			12b	1		
786 Kimberly Spurs				The state of the s			335			
West Gina PA 69883-7837				Other (see enclosed Notice to Employee)			12c			
							E	991		
							12d			
							_	450		
							D	453		
	ress and ZIP code over's state ID number	16 State wages, tips, etc.	17 State income tax	ļ	18 Local wages, tips, etc.	19	Local income tax	20	Locality name	
NJ	663-91-784	83194.21	6500.4		158692.74		9202.11		,	
NO	003-31-704	03194.21	0300.4		130092.74		2202.11	Cyr	nthia Burgs	
со	453-90-632	79054.41	6223.5		128961.96	16	6409.21	Go	uld Place	

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.

F	REISSUED	a Employee's soc	ial security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	3	04-39-4621	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>b</b> Emplo	yer identification number	•			1 '	Vages, tips, other compensation		2 Federal income tax withheld			
26-0400969					159174.23			18265.73			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Stevens-Prince Group				171416.63			13113.37				
4789 Gilbert Ridges				5 Medicare wages and tips			6 Medicare tax withheld				
				160368.35			4650.68				
Briannamouth WA 14347-1779					7 Social security tips			8 Allocated tips			
				171416.63			160368.35				
d Contro	ol number				9 Advance EIC payment			10 Dependent care benefits			
5227873								235			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Larry Williams				182 13 Statutory Retirement Third-party employee plan sick pay			5245				
786 Kimberly Spurs					emp	x			335		
West Gina PA 69883-7837					14 Other (see enclosed Notice to Employee)			12c			
				E				991			
								12d			
							D	D 453			
f Employee's address and ZIP code						-					
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	_ocal income ta	ıx	20 Locality name	
ŊJ	663-91	L-784	83194.21	6500.4		158692.74	29	202.11		Cynthia Burgs	
со	453-90	0-632	79054.41	6223.5		128961.96	16	409.21		Gould Place	

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

