KEIGGGED					Safe, Accurate,				Visit the IRS Website				
STATEMENT 56	51-71-0475	OMB N	o. 1545-00	008 FAST	Use		116	at www.ii	s.gov/efile				
b Employer identification number			1 V	Vages, tips, other c	ompensation	2	Federal	l income tax	withheld				
01-7303652		110903.26				21945.13							
c Employer's name, address, and ZIP code		•	3 Social security wages			4	4 Social security tax withheld						
Mcdaniel PLC PLC	96769.6				7402.87								
3998 Harvey Hollow A	5 Medicare wages and tips				6 Medicare tax withheld								
Lake Kevinchester	105559.1				3061.21								
hake Kevinchester	7 Social security tips			8	8 Allocated tips								
		96769.6				1055	59.1						
d Control number				dvance EIC payme	ent	10	Depend	dent care be	nefits				
7378713						194							
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12						
Erika Love				282			D 2129						
EIIRA LOVE	13 Statutory Retirement Third-party employee plan sick pay					1							
264 Emily Alley	СПр	pian pian	Sick pay		H	241							
New Gregory NC	14 Other (see enclosed Notice to Employee)					I							
3 -					P	310							
							12d						
							G	245					
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 in	come tax	(20 Locality	name			
SC 773-30-280	57161.07	3290.56		109111.	36	21751	. 67		Hayes	Wall			
DC 707-43-751	60103.06	4812.85		102687.	47	16625	.96		Lee	Dam			

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 socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if							
S	TATEMENT	56	51-71-0475	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Emplo	yer identification number				Wages, tips, other compensation			Federal income tax withheld				
01-7303652					110903.26			21945.13				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Mcdaniel PLC PLC				96769.6			7402.87					
3998 Harvey Hollow Apt. 668				5	Medicare wages and tips	6 Medicare tax withheld 3061.21						
Lake Kevinchester SC 03478-6643										105559.1		
					7	Social security tips	8 Allocated tips					
					96769.6			105559.1				
d Control number				9 Advance EIC payment 10 Dependent care benefits					enefits			
7378713					194							
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions				for box 12					
Erika Love 264 Emily Alley New Gregory NC 96192-1451				282			D 2129					
				13 Sta	utory Retirement Third-party ployee plan sick pay	12b	ı					
							H	Н 241				
				14	Other (see enclosed Notice to Employ	12c	ĺ					
							P	310				
							12d					
							G	245	245			
	oyee's address and ZIP coo			_								
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income		20 Localit	y name	
SC	773-30)-280	57161.07	3290.56		109111.36	21	751.6	7	Hayes	Wall	
DC	707-43	3-751	60103.06	4812.85		102687.47	16	625.9	6	Lee	Dam	

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

