F	REISSUED	a Employee's socia	•			Safe	Accurate,	2e 1	w H		Visit the	IRS Websit	е
S	TATEMENT	48	34-20-7524	OMB	No. 1545-0	008 FAS	T! Use	G		U	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld				
92-6054369						241570.95			62448.51				
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld				
Peterson-Webb Inc						312718.61			23922.97				
67011 Rodriguez Row					5	5 Medicare wages and tips			6 Medicare tax withheld				
						239401.35				6942.64			
East Victoriafurt SD 19853-9325						7 Social security tips			8 Allocated tips				
						312718.61			239401.35				
d Control number						9 Advance EIC payment 10 Dependent care benefits				enefits			
81878						193							
e Employee's first name and initial Last name					11	11 Nonqualified plans 12a See instructions for b			or box 12				
Tina Mccoy 768 Chapman Isle New Mariaborough WA 30242-806						242			н 4731				
						13 Statutory Retirement Third-party employee plan sick pay			12b				
						x x			245				
						Other (see enclos	ed Notice to Emplo	yee)	12c				
										G	160		
									12d				
										D	403		
4 F	ovee's address and ZIP cod	1-								ע	403		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income ta:	×	18 Local wage	s, tips, etc.	19 Lo	ocal inco	me tax		20 Locality	name
WA	627-82	-344	132598.79	11556.04		299313	. 78	389	968.	88		Valerie	Flat
								†					
WI	754-30	-738	109966.2	13521.17		308267	. 02	379	974.	62		Williams	Loop

Wage and Tax
Form W-2 Statement

5010

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.

REISSUED a Employee's social security number	This information is being furnished to the Internal Revenue Service. If you are required							
STATEMENT 484-20-7524	OMB No. 1545-0	b 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 Federa	Federal income tax withheld				
92-6054369		241570.95	6244	62448.51				
c Employer's name, address, and ZIP code	3 5	Social security wages	4 Social	4 Social security tax withheld				
Peterson-Webb Inc		312718.61	2392	23922.97				
67011 Rodriguez Row	5 1	Medicare wages and tips	6 Medic	Thousand tax mamoid				
East Victoriafurt SD 19853-9325		239401.35		6942.64				
East victoriature SD 19055-9525	7	Social security tips	8 Alloca	8 Allocated tips				
		312718.61		239401.35				
d Control number	9 /	Advance EIC payment	10 Deper	10 Dependent care benefits				
81878				193				
e Employee's first name and initial Last name	11	Nonqualified plans	12a See ir	12a See instructions for box 12				
·		242	н	н 4731				
Tina Mccoy	13 Statu		12b					
768 Chapman Isle	emp	oyee plan sick pay		245				
New Mariaborough WA 30242-806	14 (Other (see enclosed Notice to Emplo	yee) 12c	12c				
New Harrasorough Wil Sorie Soc			G	G 160				
			12d	12d				
			D	403				
f Employee's address and ZIP code				100				
	income tax	18 Local wages, tips, etc.	19 Local income ta	x 20 Locality name				
WA 627-82-344 132598.79 1155	6.04	299313.78	38968.88	Valerie Flat				
WI 754-30-738 109966.2 1352	1.17	308267.02	37974.62	Williams Loop				

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

