REISSUED a Employee's social security number	Safe, Accurate,	Visit the IRS Website			
STATEMENT 467-60-2343	DMB No. 1545-0008	at www.irs.gov/efile.			
b Employer identification number	1 Wages, tips, other compensation 2 Fe	2 Federal income tax withheld			
13-9596651	82382.67 173	17316.14			
c Employer's name, address, and ZIP code	3 Social security wages 4 So	4 Social security tax withheld			
Ross and Sons Group	60751.0 46	4647.45			
84240 Gerald Key Apt. 204	5 Medicare wages and tips 6 Me	6 Medicare tax withheld			
	63599.01	1844.37			
Lake Staceyshire AK 32953-7145	7 Social security tips 8 All	8 Allocated tips			
	60751.0	63599.01			
d Control number	9 Advance EIC payment 10 De	10 Dependent care benefits			
5920965		164			
e Employee's first name and initial Last name	11 Nonqualified plans 12a Se	12a See instructions for box 12			
- 1	149	4719			
John Neal	13 Statutory Retirement Third-party 12b employee plan sick pay				
792 Scott Manor	employee plan sick pay	592			
Port Tiffany DE 61067-0966	14 Other (see enclosed Notice to Employee) 12c	1			
		864			
	12d	12d			
		620			
f Employee's address and ZIP code					
15 State Employer's state ID number 16 State wages, tips, etc. 17 State i	ne tax 18 Local wages, tips, etc. 19 Local incom	ne tax 20 Locality name			
NJ 303-96-614 43856.86 2874	59964.73 14087.9	97 Watts Branch			
ID 937-78-341 39985.79 2999	7 94001.68 11073.9	98 Bailey Curve			

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement

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	EISSUED	a Employee's soci	•		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						
	ATEMENT	4	67-60-2343	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld				
13-9596651				82382.67			17316.14				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Ross and Sons Group				60751.0			4647.45				
84240 Gerald Key Apt. 204				5 Medicare wages and tips 63599.01			6 Medicare tax withheld 1844.37				
Lake Staceyshire AK 32953-7145											
			7 Social security tips			8 Allocated tips					
				60751.0			63599.01				
d Control n	d Control number			9 Advance EIC payment			10 Dependent care benefits				
5920965				164							
e Employe	e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box 12			for box 12				
John Neal 792 Scott Manor Port Tiffany DE 61067-0966			149			4719					
			13 Statutory Retirement Third-party employee sick pay 14 Other (see enclosed Notice to Employee)			^{12b} 592					
									12c		
						G	864				
						P	P 620				
	e's address and ZIP coo		T	T.= 2		T				T	
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality name	
NJ	303-96	5-614	43856.86	2874.1		59964.73	14	087.97		Watts Branch	
ID	937-78	3-341	39985.79	2999.07		94001.68	11	.073.98		Bailey Curve	

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

