F	REISSUED	a Employee's socia	al security number			Sat	e, Accurate,	Re O	H	Visit the	IRS Website		
S	TATEMENT	69	97-06-5725	OMB N	o. 1545-(0008 FA	ST! Use		ile)	at www.i	rs.gov/efile.		
b Employer identification number					1	1 Wages, tips, other compensation				2 Federal income tax withheld			
48-3070209					230036.11				31887.93				
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Romero, Smith and Bird and Sons					247991.79				18971.37				
880 Parker Mills Woodville OR 11672-2058					5 Medicare wages and tips				6 Medicare tax withheld				
					262998.51				7626.96				
					7 Social security tips				8 Allocated tips				
					247991.79				262998.51				
d Contro	ol number				9 Advance EIC payment			10	10 Dependent care benefits				
	7580669								280				
e Employee's first name and initial Last name					11 Nonqualified plans			12	12a See instructions for box 12				
Charles Smith 64312 Jason Ranch Conniestad AK 62732-2829					167				D 4819				
					13 Statutory Retirement Third-party				b	1			
					employee plan sick pay 14 Other (see enclosed Notice to Employee)				D	438			
									С	1			
									G	937			
									12d				
									н	733			
f Employee's address and ZIP code										•	_		
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wag	es, tips, etc.	19 Loca	income ta	x	20 Locality name		
AR	563-77	-404	106072.36	7547.6		199947	.08	2793	7.15		Oconnor Terrace		
NJ	145-06	-186	106177.66	7422.45		262616	.86	2805	9.99		Shawn Tunnel		

Wage and Tax Statement

Form W-2

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.

R	REISSUED a Employee's social security number					This information is being furnished to the Internal Revenue Service. If you are required														
	ATEMENT	6	97-06-5725	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 Employer identification number					Wages, tips, other compensation				Federal income tax withheld											
48-3070209					230036.11			31887.93												
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld											
Romero, Smith and Bird and Sons 880 Parker Mills Woodville OR 11672-2058					247991.79 5 Medicare wages and tips 262998.51				18971.37 6 Medicare tax withheld 7626.96											
													7 Social security tips				8 Allocated tips			
													247991.79				262998.51			
					d Control number						9 Advance EIC payment			10 Dependent care benefits						
					•	7580669									280					
e Employ	e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12										
					167			D 4819												
(Charles Smith					atutory Retiren	ent Third-party	у	12b											
64312 Jason Ranch						employee plan sick pay				43	438									
Conniestad AK 62732-2829					L.L	<u> </u>			D	430	.									
					14	Other (see enclose	ed Notice to Empio	oyee)	12c	I										
									G	93	7									
									12d	1										
									н	73:	733									
f Employ	ree's address and ZIP coo	de								1.0	-									
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages	, tips, etc.	19	Local incom	e tax	20 Locality name									
AR	563-77	7-404	106072.36	7547.6		199947.	08	27	937.1	.5	Oconnor Terrace									
NJ	145-06	5-186	106177.66	7422.45		262616.	86	28	059.9	9	Shawn Tunnel									

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

