REISSUED	EISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website			
STATEMENT	00	01-67-4128	OMB N	o. 1545-00	008 FAST! Us	se 🔍		at www	.irs.gov/efile.		
b Employer identification number				1 \	Vages, tips, other comp	ensation	2	Federal income to	ax withheld		
31-7142371				202171.43				68562.57			
c Employer's name, address, and	ZIP code			3 Social security wages			4 5	4 Social security tax withheld			
Pitts PLC Group				176701.43				13517.66			
1571 David Lock				5 N	Medicare wages and tips	1	6				
Total David Code The 00005 0506				198030.46				5742.88			
East Dannyfurt IA 29305-3536				7 Social security tips			8 /	1			
				176701.43				198030.46			
d Control number				9 Advance EIC payment			10	10 Dependent care benefits			
94167								152			
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12			
Douglas Obrien				102				G 3957			
				13 Statutory Retirement Third-party employee plan sick pay			12b	1			
89307 Eric Locks Suite 979						sick pay		309			
Donnatown MA 74078-2591				14 (Other (see enclosed Not	ice to Employee) 12c	ı			
								588			
			12d				12d				
								889			
f Employee's address and ZIP co	de							003			
15 State Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips,	etc. 1	9 Local inco	me tax	20 Locality name		
CA 855-4	7-635	103572.6	7129.93		212485.37	2	6551.	95	Briana Passage		
MT 537-70	0-888	103487.06	7226.73		177090.97	3	37254.	51	John Light		

Wage and Tax Statement 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	al security number		This information is being furnished to the Internal Revenue Service. If you are required					
STA	ATEMENT	00	01-67-4128	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				1 Wages, tips, other compensation			2 Federal income tax withheld			
31-7142371					202171.43			68562.57		
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Pitts PLC Group					176701.43			13517.66		
1571 David Lock				5 Medicare wages and tips			6 Medicare tax withheld			
				198030.46			5742.88			
E	East Dannyfurt IA 29305-3536				7 Social security tips			8 Allocated tips		
				176701.43			198030.46			
d Control number				9 Advance EIC payment 10			10 Dependent care benefits			
94167							152			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Douglas Obrien				102			G 3957			
				13 Statutory Retirement Third-party			12b			
89307 Eric Locks Suite 979				employee plan sick pay			309			
Donnatown MA 74078-2591				14	Other (see enclosed Notice to Employ	/ee)	12c	1		
							588			
							12d			
							889			
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax					140 1	140	ocal income tax		00	
			9			18 Local wages, tips, etc.				20 Locality name
CA	855-47	7-635	103572.6	7129.93		212485.37 26		6551.95		Briana Passage
мт	537-70)-888	103487.06	7226.73		177090.97	37	254.51		John Light

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

