REISSUED	a Employee's soci	al security number			Safe, A	Accurate,			Visit the	IRS Website	
STATEMENT	0	91-66-3909	OMB N	lo. 1545-0	008 FAST!	Use	G~IL	le	at www.ii	rs.gov/efile.	
b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld			
30-3922533					217589.57			66222.24			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Robinson-Hanson LLC					207504.36			15874.08			
5997 Freeman Flats					5 Medicare wages and tips			6 Medicare tax withheld			
Lake Charles DC 15485-8773					270199.48			7835.78			
					7 Social security tips			8 Allocated tips			
					207504.36			270199.48			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
8579549									216		
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
					247			н 5436			
Troy Wong					13 Statutory Retirement Third-party employee plan sick pay				1		
5216 Rodriguez Centers Suite 071					x plan sick pay			D	255		
Wrightburgh GA 08868-3325					14 Other (see enclosed Notice to Employee)						
									906		
					ı			12d			
									400		
									420		
f Employee's address and ZIP of 15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages,	ine oto	19 Local in	como tav	,	20 Locality name	
		0				•				,	
LA 172-2	1-483	100414.45	8798.64		249189.06 21		Z1823	L823.92		Anderson Crossing	
AR 284-2	2-184	99351.22	12119.31		274871.21 30		30802	0802.59		Steele Junctions	

Wage and Tax
Form W-2 Statement

5070

Cut here. Keep lower portion for your records.

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.

REISSUED a Employee's social 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 091-66-3909 OMB No. 1545-0008 **STATEMENT** this income is taxable and you fail to report it. **b** Employer identification number Wages, tips, other compensation Federal income tax withheld 30-3922533 217589.57 66222.24 c Employer's name, address, and ZIP code Social security wages Social security tax withheld 207504.36 15874.08 Robinson-Hanson LLC Medicare wages and tips Medicare tax withheld 5997 Freeman Flats 270199.48 7835.78 Lake Charles DC 15485-8773 Social security tips Allocated tips 207504.36 270199.48 d Control number Advance EIC payment 10 Dependent care benefits 8579549 216 See instructions for box 12 e Employee's first name and initial Last name Nonqualified plans 12a 247 Н 5436 Wong Troy 13 Statutory Third-party 12b employee 5216 Rodriguez Centers Suite 071 255 X X D Other (see enclosed Notice to Employee) 12c Wrightburgh GA 08868-3325 906 12d 420 f Employee's address and ZIP code 16 State wages, tips, etc. 17 State income tax 15 State Employer's state ID number 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 100414.45 8798.64 249189.06 21823.92 LA 172-21-483 284-22-184 99351.22 274871.21 AR 12119.31 30802.59 Steele Junction

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

