REISSUED a E	mployee's social security number			Safe, Accurate,		Visit the IRS Website			
STATEMENT	100-69-0203	OMB N	o. 1545-0008	FAST! Use			at www.irs.gov/efile.		
b Employer identification number			1 Wages, tips, other compensation			2 Federal income tax withheld			
14-8364333			164280.49			28456.11			
c Employer's name, address, and ZIP co	de		3 Soc	ial security wages	4	4 Social security tax withheld			
Young-Dawson Group			152765.9			11686.59			
6007 Dwayne Villages			5 Medicare wages and tips			6 Medicare tax withheld			
South Andreborough AK 43290-2194				02174.83		5863.07			
South Andreborough AR 43290-2194				ial security tips	8	8 Allocated tips			
	152765.9			202174.83					
d Control number			9 Adv	ance EIC payment	10	•	ent care benefits		
1363963						187			
e Employee's first name and initial	Last name	•	11 Non	qualified plans	12a	See ins	tructions for box 12		
James Bray			277			н 5727			
			13 Statutory Retirement Third-party			-			
637 John Valley Suite 802				employee plan sick pay			896		
East Juanchester WV 27641-3628				er (see enclosed Notice to Empl	oyee) 12c	1			
						G	990		
						12d			
						E	689		
f Employee's address and ZIP code									
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	1	8 Local wages, tips, etc.	19 Local in	ncome tax	20 Locality name		
AR 326-34-2	75 89557.39	9514.94	146727.87 29		29075	5.36	Lopez Ferry		
MD 184-88-9	78193.46	7506.41	1	.30241.72	27489	9.04	Rodriguez Gardens		

Wage and Tax Statement

Form W-2

5070

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.

F	REISSUED	a Employee's socia	•		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								
S	TATEMENT	10	0-69-0203	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						
14-8364333				164280.49				28456.11					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld						
Young-Dawson Group				152765.9			11686.59						
6007 Dwayne Villages			5 Medicare wages and tips			6 Medicare tax withheld							
South Andreborough AK 43290-2194			202174.83			5863.07							
			7 Social security tips			8 Allocated tips							
				152765.9				202174.83					
d Control number			9 Advance EIC payment				10 Dependent care benefits						
1363963							187						
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12						
James Bray			277				н 5727						
			13 Statutory Retirement Third-party employee plan sick pay				12b		i				
637 John Valley Suite 802			X State Stat				896						
East Juanchester WV 27641-3628			14 Other (see enclosed Notice to Employee)				12c						
								G	990				
						İ	12d		1				
							E	689					
f Employee's address and ZIP code				1		[
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		10			9 Local income tax			20 Locality	y name
AR	326-34	1-275	89557.39	9514.94		146727.87 29		29	29075.36			Lopez	Ferry
MD	184-88	3-942	78193.46	7506.41		130241.7	2	27	489.	04		Rodriguez	z Gardens

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

