REISSUED a Employee's	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Website						
STATEMENT	493-51-2787	OMB N	o. 1545-000	FAST! Use		≁file	at www.irs.gov/efile.			
b Employer identification number	mployer identification number			ges, tips, other compe	nsation	2 Federal income tax withheld				
56-1614526				L59404.67		49581.87				
c Employer's name, address, and ZIP code			3 Soc	cial security wages		4 Social security tax withheld				
Pratt, Ward and Smith Inc			:	L96694.69		15047.14				
887 Thompson Parkway Suite 285				dicare wages and tips		6 Medicare tax withheld				
North Ericfort AR 20901-7712				L51373.45		4389.83				
NOICH Effetore AR 20901-7712				cial security tips		8 Allocated tips				
				L96694.69		151373.45				
d Control number			9 Adv	rance EIC payment		10 Depen	dent care benefits			
9310166						109				
e Employee's first name and initial Last name			11 No	nqualified plans		12a See instructions for box 12				
Elizabeth Salas			248			G 8106				
			13 Statutor employe		Third-party sick pay	12b				
93329 Mary Plaza Apt. 875						E	260			
Markmouth ND 60171-3740			14 Oth	er (see enclosed Notic	e to Employee)	12c	i			
						D	783			
						12d	į			
							227			
f Employee's address and ZIP code	Т	1			1		T			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		8 Local wages, tips, e		Local income ta	20 Locality name			
MD 105-04-992	84886.23	7950.94		181346.1	26	6208.56	Brooke Coves			
AL 780-76-786	82963.62	7098.93		200683.29	30	0178.61	Robert Trail			

Wage and Tax

Form W-2 Statement

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 soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required									
S	TATEMENT	4	93-51-2787	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					
56-1614526					159404.67					49581.87				
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld					
Pratt, Ward and Smith Inc					196694.69				15047.14					
887 Thompson Parkway Suite 285					5 Medicare wages and tips				6 Medicare tax withheld					
North Ericfort AR 20901-7712				151373.45					4389.83					
				7 Social security tips					8 Allocated tips					
					196694.69				151373.45					
d Control number				9 Advance EIC payment					10 Dependent care benefits					
9310166									109					
e Employee's first name and initial Last name			11 Nonqualified plans					12a See instructions for box 12						
Elizabeth Salas			248 13 Statutory Retirement Third-party				,	G 8106						
93329 Mary Plaza Apt. 875			employée plan sick pay E 260				260							
Markmouth ND 60171-3740			14	Other (se	ee enclosed	Notice to Emplo	yee)	12c		i				
									D	783				
									12d					
								227						
f Emplo 15 State	byee's address and ZIP con		AC Chata warne time at	17 State income tax		140.1-	1 4		10.1	!:			00	
	Employer's state ID no		16 State wages, tips, etc.							9 Local income tax			20 Locality	
MD	105-04	1-992	84886.23	7950.94	181346.1 2			26	6208.56			Brooke	Coves	
AL	780-76	5-786	82963.62	7098.93		200683.29		30	0178.61			Robert	Trail	

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

