R	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website				
ST	TATEMENT	29	0-97-9209	OMB N	o. 1545-0	008 FA S	ST! Use		7 IIIE	at www.	irs.gov/efile.		
b Employ	yer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld				
!	54-7752723				221039.62				79018.49				
c Employ	yer's name, address, and 2	ZIP code		·	3 Social security wages				4 Social security tax withheld				
]	Brown, Garcia and Williams Ltd 08584 Thompson Haven Smithfort LA 22340-0272					211907.28				16210.91			
						5 Medicare wages and tips				6 Medicare tax withheld			
						190155.5				5514.51			
•						7 Social security tips				8 Allocated tips			
					211907.28				190155.5				
d Contro	Inumber				9 Advance EIC payment				10 Dependent care benefits				
4203989									197				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
_						291			D 5451				
]	Edward Davis				13 Statutory Retirement Third-party				12b				
	3330 Brooks Gateway					employee plan sick pay				145			
						14 Other (see enclosed Notice to Employee)			12c				
	Heidimouth NY 33797-0892												
										784			
									120	1			
									P	234			
f Employee's address and ZIP code											_		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wag			ocal income		20 Locality name		
TN	272-62	-934	100640.16	5631.45		161101	. 44	36	690.4	5	Kristina Drive		
MA	890-01	-197	103419.91	7185.26		193044	.5	42	276.53	3	Paula Cove		

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.

	REISSUED	a Employee's soci	•	OMPIN	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							
	STATEMENT				this income is taxable and you fail to report it.							
b Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld				
54-7752723					221039.62			79018.49				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Brown, Garcia and Williams Ltd 08584 Thompson Haven					211907.28			16210.91				
					5 Medicare wages and tips			6 Medicare tax withheld				
	Smithfort LA 22340-0272					190155.5	5514.51					
						7 Social security tips			8 Allocated tips			
						211907.28	190155.5					
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	4203989								197			
e Emplo	e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
	Edward Davis				291			D 5451				
					13 Statutory Retirement Third-party employee plan sick pay			12b	1			
	3330 Brooks Gateway					x x			145			
Heidimouth NY 33797-0892					14 Other (see enclosed Notice to Employee)			12c				
	Herdrinouch Nr 33797 0032								784			
									12d			
						!			P 234			
	yee's address and ZIP co					T	[
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		_ocal income tax		20 Locality name		
TN	272-62	2-93 4	100640.16	5631.45		161101.44	36	690.45		Kristina Drive		
MA	890-01	L-197	103419.91	7185.26		193044.5	42	276.53		Paula Cove		

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

