REISSUED	a Employee's socia	al security number				Safe, Accura	te,		Visit the	IRS Website		
STATEMENT	47	71-56-1238	OMB N	lo. 1545-0	800	FAST! Use		≁file •	at www.i	rs.gov/efile.		
b Employer identification numb	er			1 \	1 Wages, tips, other compensation				2 Federal income tax withheld			
90-699337	2				93096.11				23572.8			
c Employer's name, address, and ZIP code				3 3	3 Social security wages				4 Social security tax withheld			
Rodriguez, Scott and Nelson and Sons				115093.6				8804.66				
30744 Scott Mountains Apt. 009				5 Medicare wages and tips				6 Medicare tax withheld				
South Kellymouth NJ 76302-2228				80194.18 7 Social security tips				2325 . 63 8 Allocated tips				
-				115093.6				80194.18				
d Control number				9 /	9 Advance EIC payment			10 Dependent care benefits				
9643530							217					
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12					
Michael Castaneda				100				P 1405				
Michael Castaneda				13 Statutory Retirement Third-party employee plan sick pay				12b	i			
803 Frederick Grove Apt. 314				x				E	E 694			
East James LA 41027-0527					Other (see	enclosed Notice to	Employee)	12c	İ			
								684				
							12d					
									838			
f Employee's address and ZIP		T	T.= 4		1		1					
15 State Employer's state II		16 State wages, tips, etc.	17 State income tax			l wages, tips, etc.		Local income ta	х	20 Locality name		
IN 429-	36-387	49629.35	5768.53		65547.98 1		16	16143.5		Jennifer Island		
GA 123-	34-275	44822.85	3917.92		82196.97		9833.05		Garza Circle			

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 socia	I security number		This information is being furnished to the Internal Revenue Service. If you are required							
_	TATEMENT	47	71-56-1238	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 Emplo	yer identification number				Wages, tips, other compensation				2 Federal income tax withheld			
90-6993372					93096.11				23572.8			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Rodriguez, Scott and Nelson and Sons					115093.6				8804.66			
30744 Scott Mountains Apt. 009				5 Medicare wages and tips				6 Medicare tax withheld				
-				80194.18				2325.63				
South Kellymouth NJ 76302-2228				7 Social security tips				8 Allocated tips				
					115093.6				80194.18			
d Control number					9 Advance EIC payment				10 Dependent care benefits			
9643530								217				
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12				
Michael Castaneda				100 13 Statutory Retirement Third-party				P 1405				
803 Frederick Grove Apt. 314				X		sick pay		E	694			
East James LA 41027-0527				14 Other (see enclosed Notice to Employee)				12c				
11017 0017								684				
							-	12d				
								838				
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax					40 i		140.1	ocal income ta		00		
			16 State wages, tips, etc.			18 Local wages, tip	s, etc.			18	20 Locality name	
IN	429-36	- 38 /	49629.35	5768.53	65547.98 1		16	L6143.5		Jennifer Island		
GA	123-34	-275	44822.85	3917.92		82196.97		98	33.05		Garza Circle	

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

