15 State Employer's state ID n  MO 318-93	3-906 1	L24408.5	12337.41	_	02032.30			Alexander Gren	
15 State Employer's state ID n			12337.41	2	82652.38	34	4028.67	Alexander Glen	
		6 State wages, tips, etc.	17 State income tax	18	Local wages, tips, etc.	19	Local income tax	20 Locality name	
f Employee's address and ZIP co	de							203	
							12d		
								413	
Zimmermanberg TX 76310-9046					r (see enclosed Notice to	Employee)	12c		
34680 Ste	phanie Mou	ntain Apt.	053	X Othe		x		437	
•				13 Statutory employee	plan sic	nird-party ok pay	12b		
Isaiah Vasquez			177			2335			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
8288539							242		
d Control number				9 Adva	nce EIC payment		10 Dependent care benefits		
					83901.5		239339.49		
East Joshua OH 06869-4912					al security tips		8 Allocated tips		
24668 Alicia Rue Suite 076					39339.49		6940.85		
Smith Group LLC					83901.5 care wages and tips		21718.46  6 Medicare tax withheld		
c Employer's name, address, and ZIP code					al security wages		4 Social security tax withheld		
95-3293796					31395.92		66314.18		
<b>b</b> Employer identification number					es, tips, other compensat	tion	Federal income tax withheld		
STATEMENT	184	-85-8120	OMB N	o. 1545-0008	FAST! Use		wfile)	at www.irs.gov/efile.	
		ecurity number			Safe, Accurate			Visit the IRS Website	

Wage and Tax

5070 **Statement** Form W-2

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.

wv 799-3	2-711	112699.59	9021.21		287351.07	28	8095.97		Jeffrey Crossin										
MO 318-9	3-906	124408.5	12337.41		282652.38	34	1028.67		Alexander Gle										
5 State Employer's state ID r		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality name										
f Employee's address and ZIP co	ode							203											
								203											
						12d													
Isaiah Vasquez  34680 Stephanie Mountain Apt. 053  Zimmermanberg TX 76310-9046								413											
				X X X X 14 Other (see enclosed Notice to Employee)			12c												
							P	437											
				13 Stat emp	utory Retirement Third-party loyee plan sick pay	′	12b	Ī											
				11 Nonqualified plans 177			12a See instructions for box 12 2335												
										8288539								242	
Smith Group LLC 24668 Alicia Rue Suite 076 East Joshua OH 06869-4912				9 Advance EIC payment			10 Dependent care benefits												
				283901.5			239339.49												
				5 Medicare wages and tips 239339.49 7 Social security tips			6 Medicare tax withheld 6940.85 8 Allocated tips												
										c Employer's name, address, and ZIP code				283901.5			21718.46		
										95-3293796				231395.92 3 Social security wages			66314.18 4 Social security tax withheld		
b Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld												
STATEMENT	18	84-85-8120	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.															
REISSUED	a Employee's socia	•			This information is being furni														

Wage and Tax

**Statement** Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

