	a Employee's social security number 523-07-193b OMB No. 1		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 this income is taxable and you fail to report it.				
b Employer identification number (EIN) 94-0099343			1 Wages, tips, other compensation 38, 958		2 Federal income tax withheld 4, 663		
c Employer's name, address, and ZIP code Au Coline			3 Social security wages 40,060		4 Social security tax withheld 3 484		
17785 Conta Court, Suite 750			5 Medicare wages and tips 40, 060		6 Medicare tax withheld		
Cerritos LA, 90703			7 So	ocial security tips	8 Allocated tips		
d Control number			9		10 Dependent care benefits		
e Employee's first name and initial Last name Suff. Adam Charder			C .		С _	12a See instructions for box 12 P 4,807	
So South Win Street, Suite 2400			13 Star	13 Statutory employee plan Third-party sick pay			
50 South 16th Street, Quite 2400 Philadelphia PA 19102			14 Other		12c		
					12d		
f Employee's address and ZIP code							
15 State Employer's state ID numb 7N 00-0-1543			ne tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
·							

Form **W-2** Wage and Tax Statement



Department of the Treasury-Internal Revenue Service

Safe, accurate, FAST! Use



Copy C—For EMPLOYEE'S RECORDS (See *Notice to Employee* on the back of Copy B.)