R	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website				
ST	ATEMENT	03	37-07-1416	OMB N	o. 1545-00	008 FA	ST! Use	<i>G</i>	IIIE	at www.i	rs.gov/efile.		
b Employ	er identification number			·	1 Wages, tips, other compensation				2 Federal income tax withheld				
71-6374971					249501.21				26149.11				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Frederick-Hendricks Group					254242.78				19449.57				
01670 Adams Islands					5 Medicare wages and tips				6 Medicare tax withheld				
7	Angelatown AZ 21706-7217					224061.76				6497.79			
_						7 Social security tips				8 Allocated tips			
					254242.78				224061.76				
d Control number					9 Advance EIC payment			1	10 Dependent care benefits				
3	343207								150				
e Employee's first name and initial Last name					11 Nonqualified plans			1	12a See instructions for box 12				
					164				G 6331				
	James Williams					13 Statutory Retirement Third-party							
95060 Crystal Burg Apt. 070 Davisburgh AR 30937-0798						employee plan sick pay X Dither (see enclosed Notice to Employee)				120			
Davisburgii Ak 30937-0796										738			
								1	12d				
										070			
										278			
f Employ 15 State	ree's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	<u> </u>	18 Local was	ies tins etc	19 1 00	al income ta	Υ	20 Locality name		
NE.	112-76		124132.88	6171.87		3.7,7,7			8603.11		,		
NE	112-16	-009	124132.88	01/1.8/		100/3/	.01	200	03.11		William Spring		
PA	349-50	-216	129509.36	8944.76		316985	5.0	388	40.21		Ramirez Passage		

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 **Statement**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.

REIS	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you are requ										
_	EMENT	03	37-07-1416	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 ide	b Employer identification number					Wages, tips, other compensation			2 Federal income tax withheld		
71-6374971					249501.21			26149.11			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Frederick-Hendricks Group					254242.78			19449.57			
01670 Adams Islands					5 Medicare wages and tips			6 Medicare tax withheld			
					224061.76			6497.79			
Ang	Angelatown AZ 21706-7217					7 Social security tips			8 Allocated tips		
					254242.78			224061.76			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
343207					ļ			150			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
					164			G 6331			
Jai	James Williams 95060 Crystal Burg Apt. 070					13 Statutory Retirement Third-party			12b		
95						oyee plan sick pay		E 120			
Davisburgh AR 30937-0798					14 Other (see enclosed Notice to Employee)			12c			
				738							
							12d	I			
								278			
	f Employee's address and ZIP code										
15 State E	mployer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		ocal income tax	20 Locality name		
NE	112-76	5-689	124132.88	6171.87		186737.87 2		28603.11		William Spring	
PA	349-50	-216	129509.36	8944.76		316985.0	38	840.21		Ramirez Passage	

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

