a Employee's social sec	curity number -07-5897	OMB No	o. 1545-00	Safe, Acc	188	e ~f	ile		IRS Website rs.gov/efile.	
b Employer identification number (EIN)			1 Wages, tips, other compensation			2	2 Federal income tax withheld			
55-7696147			194025.01				46212.8			
c Employer's name, address, and ZIP code			3 Social security wages 247751.92			-	4 Social security tax withheld 18953.02			
Haynes, Brennan and Blair PLC 70524 Daniels Camp Steeleberg AZ 54902-1252			5 Medicare wages and tips 188421.16			6				
			7 Social security tips			8				
			247751.92				188421.16			
d Control number			9 Verification Code			10				
2(106		
e Employee's first name and initial Last name		Suff.	11 N	onqualified plans		12a C	See in	nstructions	for box 12	
David Jones 6915 Madison Ways Suite 100 West Monicaview NV 81784-1800			257 13 Statutory Retirement Third-party employee plan sick pay X X Third-party sick pay X Third-party sick pay			12b	НН	7934		
						o d e	K	523		
						12c C o d	н	782		
						12d C o d	A	344		
f Employee's address and ZIP code 15 State Employer's state ID number 16	State wages, tips, etc.	17 State income tax		18 Local wages, tips,	etc I	19 Local ii	ncome to	NY.	20 Locality name	
	7840.06	7254.97		3.7,7,7			2784.83		Hernandez Ville	
NC 978-48-582 93	1823.27	5340.65		194031.63		36617	7.57		Lee Inlet	

Wage and Tax
Form W-2 Statement

5078

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.