a Employee's social security number			Safe, Accurate,				Visit the IRS Website				
20	65-06-6030	OMB N	o. 1545-00	008 <b>FAS</b>	Γ! Use		le a	t www.ir	s.gov/efile.		
b Employer identification number (EIN)			1 V	Vages, tips, other	compensation	2	Federal in	come tax	withheld		
10-1364649				203135.	87		38789	. 6			
c Employer's name, address, and ZIP code			<b>3</b> S	Social security was	jes	4	Social sec	curity tax v	vithheld		
Snyder PLC LLC				261097.		19973.98					
693 Jeffrey Underpass Suite 724				5 Medicare wages and tips				6 Medicare tax withheld			
Derekberg NM 53019-6366				191848.32				5563.6 8 Allocated tips			
			<b>7</b> S	Social security tips 261097.		8		•	48.32		
d Control number			9			10	Dependen	nt care be	nefits		
84							2	279			
e Employee's first name and initial Last nam	Э	Suff.	11 N	lonqualified plans		<b>12a</b> C	See instr	uctions f	or box 12		
Casey Price		143		o d e	3561						
Casey Price			13 Statu emple	•	ent Third-party sick pay	<b>12b</b> C	ı				
5453 Arthur Island	l Apt. 720		Спрк	x	X	o d e	FF 2	262			
Port Paul VA	39874-6954		14 0	Other		<b>12c</b> C					
						o d e	DD 3	358			
						12d C					
						d e	V 2	229			
f Employee's address and ZIP code	Tab Order and the sale	147 00010 10000010		140.1	Mark and a	140 1 11			00.1		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages		19 Local in			20 Locality name		
SD 194-03-464	101046.12	13424.97		148346.	94	20837	'.7		Stephanie Freeway		
CA 682-83-305	102824.92	8595.18		182213.	38	40259	. 92		Melissa Ford		

Wage and Tax
<sub>w-2</sub> Statement

5074

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.

a Employee's social security number This information is being furnished to the Internal Revenue Service.										
	265-	06-6030	OMB No	DMB 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 identification number			Wages, tips, other compensation			2 Federal income tax withheld				
10-1364649			203135.87			38789.6				
c Employer's name, address, and ZIP	code			3	Social security wages		4 Social s	ecurity tax	withheld	
Snyder PLC LLC			261097.74			19973.98				
693 Jeffrey Underpass Suite 724 Derekberg NM 53019-6366			5 Medicare wages and tips			6 Medicare tax withheld				
				191848.32			5563.6			
				7 Social security tips			8 Allocated tips			
					261097.74			1918	48.32	
d Control number				9		1	0 Depend	lent care be	enefits	
8482741								279		
e Employee's first name and initial	Last name		Suff.	11	Nonqualified plans	1	2a See ins	tructions f	for box 12	
Casey Price				143 13 Statutory Retirement Third-party			3561			
5453 Arthur Island Apt. 720				tory Retirement Third-party loyee plan sick pay  X  X		FF 262				
		- 39874-6954		14 Other (see enclosed Notice to Employee)			12c			
Port Paul	96/4-6934					DD	358			
							12d			
						'				
							V	229		
f Employee's address and ZIP code	1.0	0	L = 0 · · ·		Tra	1.0	11		Lag I III	
15 State Employer's state ID numb		State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		al income tax		20 Locality name	
SD 194-03-	464 10	1046.12	13424.97		148346.94	208	37.7		Stephanie Freeway	
CA 682-83-	305 10	2824.92	8595.18		182213.38	402	59.92		Melissa Ford	

Wage and Tax

Form W-2 **Statement**Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on the back of Copy B.)'



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

