REISSUED	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS					IRS Webs	ite			
STATEMENT	64	16-10-3749	OMB N	lo. 1545-000	8 FAST! Us	e	G~ I	ile	at www.i	rs.gov/efile	).		
b Employer identification number				1 Wages, tips, other compensation				Federa	l income tax	withheld			
11-2716768					193916.34				41964.12				
c Employer's name, address,	and ZIP code			<b>3</b> So	3 Social security wages				4 Social security tax withheld				
Robinson-Smith Group				236456.32				18088.91					
33854 Robinson Pike					5 Medicare wages and tips				6 Medicare tax withheld				
Lake Danielle NE 88109-5791					225793.04				6548.0				
hake Danielle NE 80109-3791					7 Social security tips			8 Allocated tips					
					236456.32			225793.04					
d Control number				<b>9</b> Ad	vance EIC payment		10	Depen	dent care be	enefits			
1796518								273					
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12					
				118				8957					
Dana Miller				13 Statutory Retirement Third-party employee plan sick pay			12b		i .				
1632 Rodgers Brooks Apt. 856					Sick pay				н 487				
North Bruceland CO 80614-7739					ner (see enclosed Noti	ce to Employ	ee) 12c		1				
1.02011 220020110 00 00021 1,709									371				
f Employee's address and ZIP code							12d	12d					
								G	272				
				!				- 1-: <b>-</b>					
15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax			<u>'</u>	18 Local wages, tips, etc. 19		19 Local in	9 Local income tax		20 Locality	/ name			
MA 966-	65-819	91239.16	3820.17	201167.4			20657	0657.18		Lauren	Mount		
MN 107-	44-499	98027.97	4357.76	[:	225580.06		24216	5.72		Lopez	Place		

Wage and Tax

5070 **Statement** 

Department of the Treasury--Internal Revenue Service

Form W-2 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.

RF	EISSUED	a Employee's soci	al security number			This information is being furnis	hed to the	Internal Re	evenue Sen	vice. If you a	re required	
	ATEMENT	6	46-10-3749	OMB	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 identification number					Wages, tips, other compensation			2 Federal income tax withheld			
11-2716768						193916.34		41964.12				
c Employer's name, address, and ZIP code					3 5	3 Social security wages			4 Social security tax withheld			
Robinson-Smith Group						236456.32			18088.91			
33854 Robinson Pike					5 N	5 Medicare wages and tips			6 Medicare tax withheld			
					225793.04		6548.0					
<u>_</u>	Lake Danielle NE 88109-5791				7 5	Social security tips	8	8 Allocated tips				
					236456.32		225793.04					
<b>d</b> Control r	d Control number				9 /	9 Advance EIC payment			10 Dependent care benefits			
1796518								273				
e Employee's first name and initial Last name				11 1	11 Nonqualified plans			12a See instructions for box 12				
Dana Miller 1632 Rodgers Brooks Apt. 856 North Bruceland CO 80614-7739				13 Statu	118 tory Retirement Third-party	11	8957					
					employee plan sick pay			н 487				
				14 (	Other (see enclosed Notice to Employ	/ee) 12	12c					
				1			371					
						12	2d					
							G	272				
1 . / .	e's address and ZIP coo		Transit is	Li= o		Las e e	1.0			Tag : ::		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income ta	(	18 Local wages, tips, etc.		al income ta	Х	20 Locality	•	
MA	966-65	-819	91239.16	3820.17		201167.4	2065	57.18		Lauren	Mount	
MN	107-44	-499	98027.97	4357.76		225580.06	2421	L6.72		Lopez	Place	

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

