REISSUED	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website			
STATEMENT	23	31-03-7548	OMB N	o. 1545-0	DOB FAST!	Use 🐃	$G^{\prime\prime}I$	le)	at www.i	rs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld			
88-5012473				186394.01				29833.56			
c Employer's name, address, and	ZIP code			3 Social security wages				4 Social security tax withheld			
Simpson and Sons LLC				224142.7			1	17146.92			
5795 Charles Walks				5 Medicare wages and tips			6				
				162347.34				4708.07			
Jeremystad MT 41546-5551				7 Social security tips			8	8 Allocated tips			
				224142.7				162347.34			
d Control number				9 Advance EIC payment			10				
9255079								189			
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12			
			157				P 3597				
Jennifer Weber				13 Statutory Retirement Third-party			12b				
034 Williams Ports Suite 738				employee plan sick pay				E 493			
				14 (	Other (see enclosed i	Notice to Employe	ee) 12c				
Port Hayley MO 21097-0922							_				
						40.1	G 798				
						120		I			
									247		
f Employee's address and ZIP co		1									
15 State Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tip		19 Local in		(	20 Locality name	
CA 434-28	3-959	87626.2	9900.79		209135.1	2	23361	85		Pierce Valleys	
FL 931-11	L-584	91057.35	10405.58		191522.8	6	29078	3.22		Nelson Vista	

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.

F	REISSUED a Employee's social security number				This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	231-03-7548	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>b</b> Emplo	yer identification number			1 Wages, tips, other compensation			Federal income tax withheld				
88-5012473				186394.01			29833.56				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Simpson and Sons LLC				224142.7			17146.92				
5795 Charles Walks				5 Medicare wages and tips			6 Medicare tax withheld				
Jeremystad MT 41546-5551				162347.34			4708.07				
				7 Social security tips			8 Allocated tips				
				224142.7			162347.34				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
	9255079				ļ			189			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Jennifer Weber				157			Р 3597				
	Jenniter weber				tory Retirement Third-party oyee plan sick pay		12b	ı			
034 Williams Ports Suite 738							E	493			
	Port Hayley MO 21097-0922				14 Other (see enclosed Notice to Employee)			Í			
						G	798				
							12d				
							247				
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.		Local income ta	X	20 Locality name		
CA	434-28-959	87626.2	9900.79		209135.12	23	361.85		Pierce Valleys		
FL	931-11-584	91057.35	10405.58		191522.86	29	078.22		Nelson Vista		

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

