REISSUED a Employee's social security number					Safe, Accurate, Visit the IRS Website at www.irs.gov/efile							
S	TATEMENT	10	06-85-5219	OM	IB No. 1545-0	008 FAST! U	se	-~ III	16	at www.i	rs.gov/efile) .
b Employer identification number						1 Wages, tips, other compensation			Federal income tax withheld			
25-6237465						124430.57			43858.98			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Smith Group PLC						120352.4			9206.96			
4687 Martin Glen West Kara CA 46524-0545						5 Medicare wages and tips			6 Medicare tax withheld			
						131583.66			3815.93			
West Rara CA 40524-0545					7	, , , , , , , , , , , , , , , , , , ,			8 Allocated tips			
						120352.4			131583.66			
d Control number						9 Advance EIC payment			10 Dependent care benefits			
6134514									221			
e Employee's first name and initial Last name						11 Nonqualified plans			12a See instructions for box 12			
Melissa Hardin						296			6669			
						13 Statutory Retirement Third-party 12b						
5516 Walsh Lake Suite 129					х	employee plan sick pay			G 893			
Meganton IA 21451-7733					14	Other (see enclosed No	tice to Employee	e) 12c		ı		
										562		
									12d			
									D	389		
f Employee's address and ZIP code										1000		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income	tax	18 Local wages, tips	, etc. 1	19 Local inc	come tax	(20 Locality	y name
MN	866-58	-441	58088.95	3621.88		154632.17	2	21311	.02		Jason	Unions
IA	507-05	-960	67580.6	3556.58		90870.93		0343.25			Randy 1	Ridges
Wage and Tax Statement						Department of the TreasuryInternal Revenue Service						

Statement Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if 106-85-5219 OMB No. 1545-0008 **STATEMENT** this income is taxable and you fail to report it. **b** Employer identification number Wages, tips, other compensation Federal income tax withheld 25-6237465 43858.98 124430.57 c Employer's name, address, and ZIP code Social security wages Social security tax withheld 120352.4 9206.96 Smith Group PLC Medicare wages and tips Medicare tax withheld 4687 Martin Glen 131583.66 3815.93 West Kara CA 46524-0545 Social security tips Allocated tips 120352.4 131583.66 d Control number Advance EIC payment 10 Dependent care benefits 6134514 221 e Employee's first name and initial See instructions for box 12 Last name Nonqualified plans 12a 296 6669 Melissa Hardin 13 Statutory Third-party 12b employee sick pay 5516 Walsh Lake Suite 129 G 893 X X Other (see enclosed Notice to Employee) 12c 21451-7733 Meganton IA 562 12d 389 D f Employee's address and ZIP code 16 State wages, tips, etc. 17 State income tax 15 State Employer's state ID number 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 866-58-441 58088.95 3621.88 154632.17 21311.02 MN Jason Unions 507-05-960 3556.58 90870.93 IA 67580.6 20343.25 Randy Ridges

Cut here. Keep lower portion for your records.

Wage and Tax

Statement Form W-2 Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

