REISSUED	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Website							
STATEMEN <sup>®</sup>	- 5	16-78-8850	OMB N	o. 1545-(	0008 <b>FAS</b>	T! Use	6	ile	at www.ii	rs.gov/efile.	-
<b>b</b> Employer identification number					<ol> <li>Wages, tips, other compensation</li> </ol>			2 Federal income tax withheld			
64-0661230					220147.49			78293.98			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Bailey-Tran Inc					163239.82			12487.85			
280 Johnston Manor					5 Medicare wages and tips			6 Medicare tax withheld			
Lewisborough UT 38028-1061					164580.46			4772.83			
Lewisborough UT 38028-1061					7 Social security tips			8 Allocated tips			
					163239.82			164580.46			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
1948517									259		
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
					221			D 2349			
Joshua Vaughan				13 Statutory Retirement Third-party			12	b			
6355 Stevens Ford				employee plan sick pay				E 341			
Mccarthyside AR 11991-2908				14 Other (see enclosed Notice to Employee)			yee) 12	12c			
							, , <u> </u>		0.61		
								H	н 961		
							12	d	ĺ		
								D	495		
f Employee's address an											
	ate ID number	16 State wages, tips, etc.	17 State income tax		18 Local wage	s, tips, etc.	19 Loca	income tax	(	20 Locality	name
MN 30	6-22-098	108856.53	5007.89		216520	. 97	3892	5.57		Gary V	/ista
WY 30	1-44-712	100062.87	5877.2		189510	. 86	2645	3.73		Jason Cro	ossroad

Wage and Tax

**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.

5070

Cut here. Keep lower portion for your records.

Department of the Treasury--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 516-78-8850 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 64-0661230 220147.49 78293.98 c Employer's name, address, and ZIP code Social security wages Social security tax withheld 163239.82 Bailey-Tran Inc 12487.85 Medicare wages and tips Medicare tax withheld 280 Johnston Manor 164580.46 4772.83 Lewisborough UT 38028-1061 Social security tips Allocated tips 163239.82 164580.46 Advance EIC payment d Control number 10 Dependent care benefits 1948517 259 See instructions for box 12 e Employee's first name and initial Last name Nonqualified plans 12a 2349 221 D Joshua Vaughan 13 Statutory Third-party 12b 6355 Stevens Ford E 341 Other (see enclosed Notice to Employee) 12c Mccarthyside AR 11991-2908 Н 961 12d 495 D f Employee's address and ZIP code Employer's state ID number 16 State wages, tips, etc. 17 State income tax 20 Locality name 15 State 18 Local wages, tips, etc. 19 Local income tax 306-22-098 108856.53 5007.89 216520.97 38925.57 MN Gary Vista 301-44-712 100062.87 5877.2 189510.86

Wage and Tax

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

WY



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

26453.73



Jason Crossroad