REIS	SUED	a Employee's socia	•			,	Safe, Accurate,	Re 1	GH		Visit the	IRS Websi	te	
STATE	MENT	54	9-65-6023	OMB N	lo. 1545-	0008 I	AST! Use	G	7 111	E	at www.i	rs.gov/efile	-	
b Employer identification number					1	1 Wages, tips, other compensation				Federal income tax withheld				
75-7824378						189586.65				62216.05				
c Employer's name, address, and ZIP code					3	3 Social security wages				4 Social security tax withheld				
Jones Ltd Ltd					233268.08				17845.01					
04924 Stout Keys Laurenstad WI 84537-0196				5	5 Medicare wages and tips				6 Medicare tax withheld					
					190722.02				5530.94					
				7					8 Allocated tips					
					233268.08			190722.02						
d Control number					9 Advance EIC payment 10 Dependent care benefit				enefits					
3172131									270					
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12						
Dehemb Manua				187			G 8525							
Robert Moore 53435 Bates Mission New Nicholasside CO 27542-9804					13 Statutory Retirement Third-party employee plan sick pay				12b		i			
											484			
					14	14 Other (see enclosed Notice to Employee)			12c					
									563					
								12d						
										Н	674			
f Employee's address and ZIP code											ı			
15 State Em	ployer's state ID nur	mber	16 State wages, tips, etc.	17 State income tax	•	18 Local v	vages, tips, etc.	19	Local inc	ome tax		20 Locality	name	
AL	043-86	-433	92630.93	7273.74		178703.36 3		31	1213.37			Denise	Ville	
NV	743-85	-054	87937.92	6322.35		18320)5.34	29	051	. 53		Lewis	Cove	

Wage and Tax

Form W-2 Statement

5010

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.

REISSUED a Emplo		This information is being furnished to the Internal Revenue Service. If you are required									
STATEMENT 549-65-6023 OMB I				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	1 Wages, tips, other compensation			2 Federal income tax withheld							
75-7824378	189586.65			62216.05							
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Jones Ltd Ltd				233268.08			17845.01				
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				190722.02							
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d Control number				9 Advance EIC payment			10 Dependent care benefits				
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New Nicholasside CO 27542-9804							563				
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15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19	Local income tax		20 Locality name			
AL 043-86-433	92630.93	7273.74	178703.36 31:			.213.37	Denise Ville				
NV 743-85-054	87937.92	6322.35		183205.34	29	051.53		Lewis Cove			

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

