REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website					
STATEMENT 869-53-2632	OMB No. 1545-0	008 FAST! Use	<b>E</b> tile	at www.irs.gov/efile.			
<b>b</b> Employer identification number	1 \	Wages, tips, other compensation	2 Federa	al income tax withheld			
94-2815486		192263.6	4926	49268.03			
c Employer's name, address, and ZIP code	3 5	Social security wages	4 Social	4 Social security tax withheld			
Richardson LLC Ltd		207729.99	1589	15891.34			
463 Barry Forge Apt. 012	5 1	Medicare wages and tips	6 Medica				
Camposfort NV 45282-3307		147265.79		4270.71			
Campositit NV 45282-5507	7 5	Social security tips	8 Allocat	8 Allocated tips			
		207729.99		147265.79			
d Control number	9 /	Advance EIC payment	10 Depen				
9017096				115			
e Employee's first name and initial Last name		Nonqualified plans	12a See in	12a See instructions for box 12			
Joshua Duran		237	G	G 9236			
		ovee plan Sick pay	12b				
412 Yolanda Place Suite 121	етр	yee plan Sick pay	P	P 306			
Lake Christinafort OR 6469	1-	Other (see enclosed Notice to Employ	ee) 12c	1			
			н	578			
			12d	12d			
			E	418			
f Employee's address and ZIP code				1			
	tate income tax	18 Local wages, tips, etc.	19 Local income ta	x 20 Locality name			
AZ 434-93-478 104933.53 12	627.03	192533.03	25278.77	Dana Well			
NJ 305-49-861 98653.56 11	065.65	236145.49	29520.4	Jasmine Crescent			

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 socia	l security number			This information is being furnis					
	TATEMENT	86	59-53-2632	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>b</b> Emplo	yer identification number	l		l l	1 V	,			2 Federal income tax withheld		
94-2815486				192263.6			49268.03				
c Employer's name, address, and ZIP code			3 8	3 Social security wages			4 Social security tax withheld				
Richardson LLC Ltd				207729.99			15891.34				
463 Barry Forge Apt. 012 Camposfort NV 45282-3307			5 N	5 Medicare wages and tips			6 Medicare tax withheld				
				147265.79			4270.71				
			7 5	7 Social security tips			8 Allocated tips				
				207729.99			147265.79				
d Control number			9 A	9 Advance EIC payment			10 Dependent care benefits				
9017096							115				
e Employee's first name and initial Last name		11 N	11 Nonqualified plans			12a See instructions for box 12					
Joshua Duran 412 Yolanda Place Suite 121 Lake Christinafort OR 64691-				237			G 9236				
			13 Statu			12b					
			empl	employee plan sick pay  X  14 Other (see enclosed Notice to Employee)			306				
			14 (				1				
							578				
						12d					
								124			
							E 418				
	yee's address and ZIP cod										
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income ta:	(	3.7,7,7,		Local income tax		20 Locality name	
AZ	434-93	3-478	104933.53	12627.03		192533.03		5278.77		Dana Well	
NT T	305-49	-061	00652 56	11065.65		236145.49	20	520.4			
NJ	305-49	-90T	98653.56	111002.65		Z30145.49	29	<b>5∠U.4</b>		Jasmine Crescent	

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

