REISSUED a Employee's social security nun			Safe, Accurate,	IRE O		Visit the I	RS Website		
STATEMENT 891-56-3	3569 OMB N	No. 1545-0008	FAST! Use		file	at www.ir	s.gov/efile.		
b Employer identification number	•	1 Wag	es, tips, other compensation	2	2 Federal	income tax	withheld		
53-5175594			177903.56			43835.73			
c Employer's name, address, and ZIP code		3 Socia	al security wages	4	Social s	ecurity tax v	withheld		
Fisher-Aguilar LLC			215093.47			16454.65			
496 Christopher Oval Suite 622			5 Medicare wages and tips			6 Medicare tax withheld			
Kimborough VT 02241-6207			78426.01		5174.35				
Kimbolough vi 02241 0207			7 Social security tips			8 Allocated tips			
			15093.47				26.01		
d Control number		9 Adva	ance EIC payment	10	) Depend	lent care be	nefits		
7929660						225			
e Employee's first name and initial Last name		<b>11</b> None	qualified plans	12	2a See ins	structions f	or box 12		
Alicia Bauer		1	47			8989			
Alicia bauer		13 Statutory employee	Retirement Third-p		2b	ı			
617 Rachel Ridges			x			P 687			
Karenton NH 9219	7-0071	14 Othe	r (see enclosed Notice to Em	ployee) 12	2c	I			
					E	838			
				12	2d	i			
					E	601			
f Employee's address and ZIP code									
15 State Employer's state ID number 16 State was	ges, tips, etc. 17 State income tax	18	B Local wages, tips, etc.	19 Loca	al income tax		20 Locality name		
CO 726-88-701 84722	.54 7264.19	177686.78 29670.31			Nicholas Highway				
TN 445-29-384 92378	.83 7736.98	1	71732.12	2225	59.11		Ortega Walks		

Wage and Tax Statement 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.

RE	ISSUED	a Employee's socia	•		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						
STA	ATEMENT	89	91-56-3569	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
<b>b</b> Employer	b Employer identification number			Wages, tips, other compensation			Federal income tax withheld				
53-5175594				177903.56			43835.73				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Fisher-Aguilar LLC				215093.47			16454.65				
496 Christopher Oval Suite 622 Kimborough VT 02241-6207			5 Medicare wages and tips			6 Medicare tax withheld					
			178426.01			5174.35					
			7 Social security tips			8 Allocated tips					
				215093.47			178426.01				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
7929660						225					
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Alicia Bauer 617 Rachel Ridges Karenton NH 92197-0071			147  13 Statutory Retirement Third-party employee plan Sick pay  X  14 Other (see enclosed Notice to Employee)			8989 12b P 687					
									12c	i	
						E 838					
							E	601			
	e's address and ZIP cod		T40 000	17 State income tax		I do I and a series of	140	Local income tax		00.1	
15 State	Employer's state ID no		16 State wages, tips, etc.			18 Local wages, tips, etc.				20 Locality name	
СО	726-88	3-10T	84722.54	7264.19		177686.78	29	670.31		Nicholas Highway	
TN	445-29	-384	92378.83	7736.98		171732.12	22	259.11		Ortega Walks	

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

