


REISSUED STATEMENT		a Employee's social security number 656-81-3451		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 86-0761625				1 Wages, tips, other compensation 192999.39		2 Federal income tax withheld 68248.96	
c Employer's name, address, and ZIP code Wagner-Green Group 9301 Peterson Rest Suite 012 Lake John IA 22987-3864				3 Social security wages 224332.44		4 Social security tax withheld 17161.43	
				5 Medicare wages and tips 231007.87		6 Medicare tax withheld 6699.23	
				7 Social security tips 224332.44		8 Allocated tips 231007.87	
d Control number 2248307				9 Advance EIC payment		10 Dependent care benefits 247	
e Employee's first name and initial Last name Linda Foster 5522 Ford Mountain Suite 601 North Charlesburgh MN 29422-6				11 Nonqualified plans 111		12a See instructions for box 12 E 5363	
				13 Statutory employee Retirement plan Third-party sick pay <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b D 895	
				14 Other (see enclosed Notice to Employee)		12c H 770	
						12d 910	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
NV 121-38-142		PA 775-98-228		17 State income tax 4048.25		18 Local wages, tips, etc.	
PA 775-98-228		PA 775-98-228		19 Local income tax 32033.37		20 Locality name Mills Drive	
PA 775-98-228		PA 775-98-228		19 Local income tax 32033.37		20 Locality name Castillo Rue	

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

Form W-2
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 STATEMENT		a Employee's social security number 656-81-3451		OMB No. 1545-0008		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 this income is taxable and you fail to report it.	
b Employer identification number 86-0761625				1 Wages, tips, other compensation 192999.39		2 Federal income tax withheld 68248.96	
c Employer's name, address, and ZIP code Wagner-Green Group 9301 Peterson Rest Suite 012 Lake John IA 22987-3864				3 Social security wages 224332.44		4 Social security tax withheld 17161.43	
				5 Medicare wages and tips 231007.87		6 Medicare tax withheld 6699.23	
				7 Social security tips 224332.44		8 Allocated tips 231007.87	
d Control number 2248307				9 Advance EIC payment		10 Dependent care benefits 247	
e Employee's first name and initial Last name Linda Foster 5522 Ford Mountain Suite 601 North Charlesburgh MN 29422-6				11 Nonqualified plans 111		12a See instructions for box 12 E 5363	
				13 Statutory employee Retirement plan Third-party sick pay <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b D 895	
				14 Other (see enclosed Notice to Employee)		12c H 770	
						12d 910	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
NV 121-38-142		PA 775-98-228		17 State income tax 4048.25		18 Local wages, tips, etc.	
PA 775-98-228		PA 775-98-228		19 Local income tax 32033.37		20 Locality name Mills Drive	
PA 775-98-228		PA 775-98-228		19 Local income tax 32033.37		20 Locality name Castillo Rue	

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

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

Safe, accurate,
FAST! Use

