REISSUED a Employee's social security number						Safe, Accu	188				IRS Web		
	TATEMENT	12.	5-30-4820	OMB N	o. 1545-000				16		rs.gov/efil	e.	
b Employer identification number						1 Wages, tips, other compensation				Federal income tax withheld			
88-6242196					113985.91				24126.0				
c Employer's name, address, and ZIP code					3 Sc	3 Social security wages				4 Social security tax withheld			
Young Inc PLC						86957.89				6652.28			
3280 Parks Avenue Suite 461						5 Medicare wages and tips				Medicare tax withheld			
	Denisechester	AK	11038-3483			106148.95			3078.32				
	Denisechester	AL	11030-3403		7 Sc	cial security tips		8	Allocate	ed tips			
						86957.89				1061	48.95		
d Control number					9 Ac	Advance EIC payment			10 Dependent care benefits				
2569218							174						
e Employee's first name and initial Last name					11 No	11 Nonqualified plans			12a See instructions for box 12				
						235				E 2421			
	Jessica Kn	night				13 Statutory Retirement Third-party							
2141 Thomas Village						employee plan sick pay				330			
Devinhaven HI 90377-6593					14 Ot	her (see enclosed Notic	e to Employee) 12c		ı			
									E	434			
								12d					
									E	773			
f Emplo	ovee's address and ZIP code									1113			
15 State	Employer's state ID number		16 State wages, tips, etc.	17 State income tax	1	18 Local wages, tips, e	tc. 1	9 Local inc	come tax	(20 Locali	ty name	
MD	689-05-0	46	61639.39	5259.24		119101.39	1	8219	.1		Vaughar	n Skyway	
WA	892-39-9	27	56402.61	5763.06		127810.49	2	2387	.53		John	Spurs	
Wage and Tax					Π	Department of the TreasuryInternal Revenue Service							
Form W-	-2 Statement	t			u								

This information is being furnished to the Internal Revenue Service.

Statement Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return

Cut here. Keep lower portion for your records.

R	REISSUED	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								
	TATEMENT	12	No. 1545-0008 this income is taxable and you fail to report it.										
b Employer identification number					1 Wages, tips, other compensation				Federal income tax withheld				
88-6242196						113985.91			24126.0				
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld				
Young Inc PLC 3280 Parks Avenue Suite 461					86957.89				6652.28				
					5 Medicare wages and tips				6 Medicare tax withheld				
Denisechester AK 11038-3483						106148.95				3078.32			
						7 Social security tips				8 Allocated tips			
						86957.89				106148.95			
d Control number						9 Advance EIC payment			10 Dependent care benefits				
	2569218				174								
e Emplo	yee's first name and initial	11 Nonqualified plans			12a See instructions for box 12								
Table Training						235				E 2421			
	Jessica Knight					atutory Retirement Third-party		12b		i			
2141 Thomas Village						employee plan sick pay			H	330			
Devinhaven HI 90377-6593					14 Other (see enclosed Notice to Employee)					I			
									E 434				
							-	12d					
									E	773			
	yee's address and ZIP co												
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.			come tax		20 Locality name		
MD	689-05	5-046	61639.39	5259.24		119101.39		L8219.1			Vaughan Skyway		
WA	892-39	9-927	56402.61	5763.06		127810.49	22	387	.53		John Spurs		

Wage and Tax

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



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

