F	REISSUED	a Employee's socia	•				Safe, Accurate,	TRE .	A HID	Visit the	IRS Website	
S	TATEMENT	27	6-96-7527	OMB N	o. 1545-	8000	FAST! Use		rfile	at www.	irs.gov/efile.	
b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld				
	01-2254124				64892.39			21069.8				
c Emplo	yer's name, address, and Z	IP code			3 Social security wages			4 Social security tax withheld				
Meyer PLC LLC					67503.73			5164.04				
337 Collins Forge Apt. 484 Christopherport WY 48719-4916					5 Medicare wages and tips				6 Medicare tax withheld			
					76794.82				2227.05			
					7 Social security tips				8 Allocated tips			
					67503.73			76794.82				
d Control number					9	Advance	EIC payment		10 Depe	ndent care b	enefits	
7325219								249				
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12				
	Tina Gill					183			D 5897			
						13 Statutory Retirement Third-party employee plan sick pay						
736 Robert Ridges Ortizmouth MI 79908-8240					14 Other (see enclosed Notice to Employee)			333				
								12c				
								716				
									12d			
									D	400		
f Emplo	vee's address and ZIP cod	•								400		
15 State	Employer's state ID nu			17 State income tax		18 Loc	cal wages, tips, etc.	19	Local income t	эх	20 Locality name	
IN	816-70	-279	30096.06	1303.39		64541.92		88	8807.03		Keith Stream	
											†	
AL	615-31	-731	32583.89	1783.44	47035.42		10975.22		Stone View			

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.

F	REISSUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	27	76-96-7527	OMB N	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 Employer identification number					Wages, tips, other compensation			2 Federal income tax withheld			
01-2254124					64892.39			21069.8			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Meyer PLC LLC					67503.73			5164.04			
337 Collins Forge Apt. 484 Christopherport WY 48719-4916					5 N	ledicare wages and tips	6 Medicare tax withheld				
						76794.82	2227.05				
					7 S	ocial security tips	8 Allocated tips				
					67503.73			76794.82			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
7325219								249			
e Emplo	yee's first name and initial	Last name	1		11 Nonqualified plans			12a See instructions for box 12			
	Tina Gill				183			D 5897			
					13 Statu		12b				
736 Robert Ridges Ortizmouth MI 79908-8240					employee plan sick pay			333			
					14 Other (see enclosed Notice to Employee)			12c			
								716			
								12d			
									D 400		
f Employee's address and ZIP code											
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	1	Local income tax		20 Locality name	
IN	816-70)-279	30096.06	1303.39		64541.92 88		307.03		Keith Stream	
AL	615-31	_731	32583.89	1783.44		47035.42	1.0	975.22		Stone View	
АГ	912-21	L-/3I	32363.69	1,03.44		4/033.42	10	1913.22		Scome Alem	

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

