REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS	S Website			
STATEMENT 459-67-9530	OMB No. 1545-0008 FAST! Use at www.irs.g	ov/efile.			
b Employer identification number	1 Wages, tips, other compensation 2 Federal income tax with	hheld			
65-4430562	175240.42 57331.27	57331.27			
c Employer's name, address, and ZIP code	3 Social security wages 4 Social security tax with	4 Social security tax withheld			
Edwards, Evans and Hanson and Sons	127500.82 9753.81	9753.81			
669 Murphy Fall Suite 746	5 Medicare wages and tips 6 Medicare tax withheld	_			
West Lynnberg MI 84081-0284	174103.83 5049.0	1			
West Hymberg Mr 04001 0204	,	8 Allocated tips			
		174103.83			
d Control number	■	10 Dependent care benefits			
930375	242				
e Employee's first name and initial Last name	11 Nonqualified plans 12a See instructions for b	12a See instructions for box 12			
Warra Dian	178 G 3891	G 3891			
Kara Diaz	13 Statutory Retirement Third-party 12b employee plan sick pay				
76324 Vincent Tunnel Suite 080					
Port Nicholas MO 22269-1211	14 Other (see enclosed Notice to Employee) 12c				
TOTO NICHOLUS NO LELOS ILLI	451				
	12d				
	н 807				
f Employee's address and ZIP code					
15 State Employer's state ID number 16 State wages, tips, etc. 17 State	come tax 18 Local wages, tips, etc. 19 Local income tax 20	Locality name			
SD 771-62-001 85315.91 4706	78 138415.11 18163.08 Er	rica Junction			
CA 034-50-529 92413.52 6432	87 194931.89 29062.72 Wi	lson Overpass			

Wage and Tax Statement

Form W-2

5070

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.

REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
STATEMENT	45	59-67-9530	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 nur	ber		l .	Wages, tips, other compensation			2 Federal income tax withheld			
65-4430562		175240.42			57331.27					
c Employer's name, address	and ZIP code			3 8	ocial security wages		4 Social s	ecurity tax	withheld	
Edwards, Evans and Hanson and Sons		127500.82			9753.81					
669 Murphy Fall Suite 746 West Lynnberg MI 84081-0284			5 Medicare wages and tips			6 Medicare tax withheld				
			174103.83			5049.01				
			7 Social security tips			8 Allocated tips				
					127500.82			1741	03.83	
d Control number		9 Advance EIC payment			10 Dependent care benefits					
930375					242					
e Employee's first name and	e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12				
Kara	Diaz			13 Statu			G	3891		
76324 Vincent Tunnel Suite 080				loyee plan sick pay			298			
Port Nicholas MO 22269-1211		14 Other (see enclosed Notice to Employee)			12c					
						451				
							12d			
						Н	807			
f Employee's address and Z		T							1	
15 State Employer's state		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		cal income tax		20 Locality name	
SD 771	-62-001	85315.91	4706.78		138415.11	181	.63.08		Erica Junction	
CA 034	-50-529	92413.52	6432.87		194931.89	290	62.72		Wilson Overpass	

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

