REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS Website
STATEMENT 208-98-6090	OMB No. 1545-0008 FAST! Use at www.irs.gov/efile.
<b>b</b> Employer identification number	1 Wages, tips, other compensation 2 Federal income tax withheld
38-7112415	161283.96 17037.14
c Employer's name, address, and ZIP code	3 Social security wages 4 Social security tax withheld
Silva Ltd Inc	174501.44 13349.36
32141 Ryan Summit	5 Medicare wages and tips 6 Medicare tax withheld
North Tracey MD 05790-3200	189929.42 5507.95
Noith Hacey Fib 03790-3200	7 Social security tips 8 Allocated tips
	174501.44 189929.42
d Control number	9 Advance EIC payment 10 Dependent care benefits
6004307	119
e Employee's first name and initial Last name	11 Nonqualified plans 12a See instructions for box 12
G. 71.11.	256 E 9206
Steven Phillips	13 Statutory Retirement Third-party 12b
3195 Brown Terrace Suite 098	employee plan sick pay 100
North Brandonburgh WI 36689-	14 Other (see enclosed Notice to Employee) 12c
<b>3</b>	218
	12d
	E 138
f Employee's address and ZIP code	
15 StateEmployer's state ID number16 State wages, tips, etc.17 State	ncome tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name
WA 908-20-740 78712.59 5552	.84 137259.48 25480.27 Sanchez Brooks
IN 318-33-084 73049.16 4955	.05 117029.49 32000.75 Melissa Mountains

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.

F	REISSUED	a Employee's socia	Il security number		This information is being furnished to the Internal Revenue Service. If you are required						
_	TATEMENT	20	8-98-6090	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				1 Wages, tips, other compensation			Federal income tax withheld				
38-7112415				161283.96			17037.14				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Silva Ltd Inc				174501.44			13349.36				
32141 Ryan Summit				5 Medicare wages and tips			6 Medicare tax withheld				
North Tracey MD 05790-3200				189929.42			5507.95				
				7 Social security tips			8 Allocated tips				
				174501.44			189929.42				
<b>d</b> Contro	d Control number			9 Advance EIC payment			10 Dependent care benefits				
6004307							119				
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box 12				for box 12				
Ohaman Phillips			256			E 9206					
Steven Phillips 3195 Brown Terrace Suite 098 North Brandonburgh WI 36689-				13 Statutory Retirement Third-party employee plan Sick pay  14 Other (see enclosed Notice to Employee)			100				
										12c	
							Notes Brancosbargs W1 30003			218	
12d											
E	E 138										
f Employee's address and ZIP code											
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		10 2000 110900, 1101		Local income tax		20 Locality name	
WA	908-20	740	78712.59	5552.84		137259.48	25	480.27		Sanchez Brooks	
IN	318-33	8-084	73049.16	4955.05	117029.49 32000.75			Melissa Mountains			

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

