


REISSUED STATEMENT		a Employee's social security number 370-79-4137		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 47-8478890				1 Wages, tips, other compensation 158905.68		2 Federal income tax withheld 54075.74	
c Employer's name, address, and ZIP code Alexander-Gallagher PLC 711 Pamela Wall Apt. 509 North Christina IL 49597-3035				3 Social security wages 136154.98		4 Social security tax withheld 10415.86	
				5 Medicare wages and tips 124404.27		6 Medicare tax withheld 3607.72	
				7 Social security tips 136154.98		8 Allocated tips 124404.27	
d Control number 8384195				9 Advance EIC payment		10 Dependent care benefits 253	
e Employee's first name and initial Last name Diane Jones 1808 Ryan Key Suite 569 Tracyberg KS 36533-3713				11 Nonqualified plans 289		12a See instructions for box 12 9990	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b E 972	
				14 Other (see enclosed Notice to Employee)		12c D 336	
						12d 520	
f Employee's address and ZIP code				15 State		16 State wages, tips, etc.	
MO		867-87-844		75245.74		17 State income tax	
DC		117-55-259		83408.67		6636.84	
						18 Local wages, tips, etc.	
						152562.42	
						19 Local income tax	
						25132.7	
						20 Locality name	
						Curry Orchard	
						Hansen Causeway	

**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 370-79-4137		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 47-8478890				1 Wages, tips, other compensation 158905.68		2 Federal income tax withheld 54075.74	
c Employer's name, address, and ZIP code Alexander-Gallagher PLC 711 Pamela Wall Apt. 509 North Christina IL 49597-3035				3 Social security wages 136154.98		4 Social security tax withheld 10415.86	
				5 Medicare wages and tips 124404.27		6 Medicare tax withheld 3607.72	
				7 Social security tips 136154.98		8 Allocated tips 124404.27	
d Control number 8384195				9 Advance EIC payment		10 Dependent care benefits 253	
e Employee's first name and initial Last name Diane Jones 1808 Ryan Key Suite 569 Tracyberg KS 36533-3713				11 Nonqualified plans 289		12a See instructions for box 12 9990	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b E 972	
				14 Other (see enclosed Notice to Employee)		12c D 336	
						12d 520	
f Employee's address and ZIP code				15 State		16 State wages, tips, etc.	
MO		867-87-844		75245.74		17 State income tax	
DC		117-55-259		83408.67		6636.84	
						18 Local wages, tips, etc.	
						152562.42	
						19 Local income tax	
						25132.7	
						20 Locality name	
						Curry Orchard	
						Hansen Causeway	

**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

