


|   |  |   |  |  |  |  |  |
|---|--|---|--|--|--|--|--|
| <b>REISSUED STATEMENT</b>   |  | a Employee's social security number<br><b>366-61-2631</b> |  | Safe, Accurate,<br>FAST! Use                          |  | Visit the IRS Website<br>at www.irs.gov/efile.   |  |
| b Employer identification number<br><b>81-0426009</b>   |  |   |  | 1 Wages, tips, other compensation<br><b>143904.09</b>  |  | 2 Federal income tax withheld<br><b>40340.28</b> |  |
| c Employer's name, address, and ZIP code<br><b>Foster, Ingram and Allen and Sons</b><br><b>0180 Mitchell Union</b><br><b>Smithmouth MN 07975-2649</b> |  |   |  | 3 Social security wages<br><b>107384.5</b>   |  | 4 Social security tax withheld<br><b>8214.91</b> |  |
|   |  |   |  | 5 Medicare wages and tips<br><b>110212.78</b>  |  | 6 Medicare tax withheld<br><b>3196.17</b>        |  |
|   |  |   |  | 7 Social security tips<br><b>107384.5</b>  |  | 8 Allocated tips<br><b>110212.78</b>             |  |
| d Control number<br><b>3523069</b>  |  |   |  | 9 Advance EIC payment  |  | 10 Dependent care benefits<br><b>267</b>         |  |
| e Employee's first name and initial Last name<br><br><b>Jason Nash</b><br><b>69989 Hall Brook Apt. 561</b><br><b>North Johnnnyburgh AL 82999-567</b>  |  |   |  | 11 Nonqualified plans<br><b>147</b>  |  | 12a See instructions for box 12<br><b>P 5278</b> |  |
|   |  |   |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | 12b <b>D 100</b>                                 |  |
|   |  |   |  | 14 Other (see enclosed Notice to Employee)   |  | 12c <b>P 307</b>                                 |  |
|   |  |   |  |  |  | 12d <b>408</b>                                   |  |
| f Employee's address and ZIP code   |  |   |  | 15 State Employer's state ID number  |  | 16 State wages, tips, etc.                       |  |
| NV  |  | 976-75-662  |  | 71749.21   |  | 17 State income tax                              |  |
| IL  |  | 202-85-403  |  | 66810.52   |  | 3398.62  |  |
|   |  |   |  | 18 Local wages, tips, etc.   |  | 19 Local income tax                              |  |
|   |  |   |  | 174882.72  |  | 26724.81   |  |
|   |  |   |  | 131612.39  |  | 23061.69   |  |
|   |  |   |  |  |  | 20 Locality name                                 |  |
|   |  |   |  |  |  | Murphy Prairie                                   |  |
|   |  |   |  |  |  | Moss Motorway                                    |  |

**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.

|   |  |   |  |  |  |  |  |
|---|--|---|--|--|--|--|--|
| <b>REISSUED STATEMENT</b>   |  | a Employee's social security number<br><b>366-61-2631</b> |  | 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<br><b>81-0426009</b>   |  |   |  | 1 Wages, tips, other compensation<br><b>143904.09</b>  |  | 2 Federal income tax withheld<br><b>40340.28</b>   |  |
| c Employer's name, address, and ZIP code<br><b>Foster, Ingram and Allen and Sons</b><br><b>0180 Mitchell Union</b><br><b>Smithmouth MN 07975-2649</b> |  |   |  | 3 Social security wages<br><b>107384.5</b>   |  | 4 Social security tax withheld<br><b>8214.91</b>   |  |
|   |  |   |  | 5 Medicare wages and tips<br><b>110212.78</b>  |  | 6 Medicare tax withheld<br><b>3196.17</b>  |  |
|   |  |   |  | 7 Social security tips<br><b>107384.5</b>  |  | 8 Allocated tips<br><b>110212.78</b>   |  |
| d Control number<br><b>3523069</b>  |  |   |  | 9 Advance EIC payment  |  | 10 Dependent care benefits<br><b>267</b>   |  |
| e Employee's first name and initial Last name<br><br><b>Jason Nash</b><br><b>69989 Hall Brook Apt. 561</b><br><b>North Johnnnyburgh AL 82999-567</b>  |  |   |  | 11 Nonqualified plans<br><b>147</b>  |  | 12a See instructions for box 12<br><b>P 5278</b>   |  |
|   |  |   |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | 12b <b>D 100</b>   |  |
|   |  |   |  | 14 Other (see enclosed Notice to Employee)   |  | 12c <b>P 307</b>   |  |
|   |  |   |  |  |  | 12d <b>408</b>   |  |
| f Employee's address and ZIP code   |  |   |  | 15 State Employer's state ID number  |  | 16 State wages, tips, etc.   |  |
| NV  |  | 976-75-662  |  | 71749.21   |  | 17 State income tax  |  |
| IL  |  | 202-85-403  |  | 66810.52   |  | 3398.62  |  |
|   |  |   |  | 18 Local wages, tips, etc.   |  | 19 Local income tax  |  |
|   |  |   |  | 174882.72  |  | 26724.81   |  |
|   |  |   |  | 131612.39  |  | 23061.69   |  |
|   |  |   |  |  |  | 20 Locality name   |  |
|   |  |   |  |  |  | Murphy Prairie   |  |
|   |  |   |  |  |  | Moss Motorway  |  |

**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

