R	REISSUED	a Employee's socia	al security number				Safe, Acci	urate,			Visit the	IRS Webs	site	
ST	TATEMENT	25	54-44-3211	OMB N	o. 1545-	8000	FAST! Us	e	e ≁fi	16	at www.i	rs.gov/efile	э.	
b Employer identification number					1 Wages, tips, other compensation				2	2 Federal income tax withheld				
58-9881216					187155.96				4	48638.69				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Richardson and Sons PLC						198398.57				15177.49				
79673 Natalie Street Suite 637						5 Medicare wages and tips				6 Medicare tax withheld				
West Jason SD 32789-8414						156203.08				4529.89				
West Jason 5D 32769-6414					7 Social security tips				8	8 Allocated tips				
						198398.57				156203.08				
d Control number						9 Advance EIC payment 10 Dependent care benefits					enefits			
1335520										135				
e Employee's first name and initial Last name						11 Nonqualified plans			12a	12a See instructions for box 12				
Samuel Smith 880 Dylan Creek North Jacob VT 88272-0664						198				G 4792				
						13 Statutory Retirement Third-party employee plan sick pay					1			
						X Other (see enclosed Notice to Employee)				D 675				
											1			
					-					G 691				
									12d	12d				
										G	799			
	yee's address and ZIP cod	е												
15 State	Employer's state ID nu	Employer's state ID number 16 State wages, tips, etc. 17 State income tax		3.,,,,,,,		19 Local in	Local income tax		20 Locality name					
TX	272-62	-312	102558.62	7966.66		208174.1 3		37202	7202.77		Christy	Overpass		
IA	699-99	-113	95839.52	6261.82		133	964.06	3	30959	.11		Paul	Path	

Wage and Tax Statement

Form W-2

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.

R	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you are require											
	TATEMENT	to file a tax return, a negligence penalty or other sanction may be imposed on you if									n you if	
b Employer identification number					1 V	/ages, tips, other compensation			al income ta	x withheld		
58-9881216						187155.96		48638.69				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Richardson and Sons PLC						198398.57		15177.49				
79673 Natalie Street Suite 637 West Jason SD 32789-8414					5 N	ledicare wages and tips		6 Medicare tax withheld				
						156203.08		4529.89				
					7 S	ocial security tips		8 Allocated tips				
						198398.57		156203.08				
d Contro	l number				9 Advance EIC payment			10 Dependent care benefits				
1335520								135				
e Employ	yee's first name and initial	Last name			11 N	onqualified plans		12a See instructions for box 12				
Samuel Smith 880 Dylan Creek North Jacob VT 88272-0664					13 Statu	198 ory Retirement Third-party		G 4792				
					employee plan sick pay			D 675				
					14 C	other (see enclosed Notice to Employ	ree)	12c				
								G 691				
							F	12d				
								G	799			
f Employee's address and ZIP code							-		1 -			
15 State	Employer's state ID number 16 State wages, tips, etc. 17 State income tax		18 Local wages, tips, etc. 19		19 Lo	ocal income ta	х	20 Locality name				
ТX	272-62	-312	102558.62	7966.66	208174.1 3		372	202.77		Christy Overpass		
IA	699-99	699-99-113 95839.52 6261.82			133964.06	309	959.11		Paul	Path		

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

