F	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website							
S	TATEMENT	10	01-43-2816	OMB	No. 1545-00	08 FAST! L	se	e ≁file	at www.	irs.gov/efile.		
b Emplo	yer identification number				1 V	1 Wages, tips, other compensation			Federal income tax withheld			
83-4022576						55819.23			12532.81			
c Emplo	yer's name, address, and 2	ZIP code			3 S	3 Social security wages			4 Social security tax withheld			
Williams LLC PLC						49712.63			3803.02			
517 Valenzuela Crescent					5 N				6 Medicare tax withheld			
						51349.44			1489.13			
East Courtney MN 55371-4158					7 S	ocial security tips		8 Alloc	8 Allocated tips			
						49712.63			51349.44			
d Control number					9 A	9 Advance EIC payment			10 Dependent care benefits			
576863									298			
e Employee's first name and initial Last name					11 N	11 Nonqualified plans			12a See instructions for box 12			
						151			G 1568			
	Michael C	coper			13 Statut	13 Statutory Retirement Third-party						
43010 Michael Turnpike Apt. 466					emplo	X	sick pay		604			
Salazarfurt ND 19440-0344					14 C	ther (see enclosed No	tice to Employe	ee) 12c	1			
									996			
								12d	ı			
								948				
f Employee's address and ZIP code												
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income ta	х	18 Local wages, tips	, etc.	19 Local income	tax	20 Locality name		
MN	851-25	-440	26181.75	2273.13		57447.64 10		10516.1	7	Clark Drive		
NM	562-72	-757	27042.33	2839.95		71953.28 61		6116.43		Richard Course		
Wage and Tax						Department of the TreasuryInternal Revenue Service						
Form W-2 Statement						J						

Statement 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.

F	REISSUED	a Employee's soc	This information is being furnished to the Internal Revenue Service. If you are required									
S	STATEMENT 101-43-2816 OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed or this income is taxable and you fail to report it.								n you if			
b Emplo	yer identification number	•		•	1 Wages, tips, other compensation			2 Federal income tax withheld				
83-4022576						55819.23			12532.81			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Williams LLC PLC					49712.63			3803.02				
517 Valenzuela Crescent East Courtney MN 55371-4158					5 1	Medicare wages and tips	6 Medicare tax withheld					
						51349.44	1489.13					
					7 Social security tips			8 Allocated tips				
						49712.63	51349.44					
d Control number					9 Advance EIC payment			10 Dependent care benefits				
	576863							298				
e Emplo	yee's first name and initial	Last nam	ne		11 Nonqualified plans			12a See instructions for box 12				
Michael Cooper					13 Statu			G 1568				
43010 Michael Turnpike Apt. 466 Salazarfurt ND 19440-0344						oyee plan sick pay		604				
						14 Other (see enclosed Notice to Employee)			12c			
					1			996				
							ŀ	12d				
								948				
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax						18 Local wages, tips, etc.	10.1	ocal income tax		20 Locality	, namo	
			3			10 = 10 m m g = 1, mp = 1, 1 m m				1		
MN	851-25)-44U	26181.75	2273.13		57447.64 10		10516.17		Clark	Drive	
NM	562-72	2-757	27042.33	2839.95		71953.28 61		16.43	Richard	Course		

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

