F	REISSUED	a Employee's socia	•				Safe, Accurate,	188	A HID	Visit the	IRS Website	
S	TATEMENT	76	54-03-4042	OMB N	o. 1545-0	8000	FAST! Use			at www.	irs.gov/efile.	
b Employer identification number						1 Wages, tips, other compensation			2 Federal income tax withheld			
65-5276512						75787.99			9178.66			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Richardson, Wilson and Ward PLC					82184.12			6287.09				
1024 Black Burgs Suite 275					5 Medicare wages and tips			6 Medicare tax withheld				
Port Jessicaland DC 67058-9373					56917.12			1650.6				
FOIL DESSIGNATION DC 6/036-93/3					7 Social security tips			8 Allocated tips				
						82184.12			56917.12			
d Control number					9 Advance EIC payment			10 Dependent care benefits				
4142460										272		
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12				
Thomas Baker 3492 Hendricks Ridge Apt. 345 Wallaceland OH 81136-7159					222			7066				
					13 Statutory Retirement Third-party employee plan sick pay			12b	1			
									670			
					14	Other (see enclosed Notice to Employee)			12c	12c		
									845			
									12d	12d		
									D	511		
f Emplo	vee's address and ZIP cod	•								311		
15 State	Employer's state ID number 16 State wages, tips, etc. 17 State income tax			18 Local wages, tips, etc. 19		9 Local income tax		20 Locality name				
WA	856-80	-395	40366.54	2939.86		55318.86 1		10	10642.36		Duarte Corners	
											<u> </u>	
MT	430-48	430-48-337 37945.08 2815.03		2815.03	562		56220.83		8216.24		Shelton Greens	

Wage and Tax

Statement Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return

Port Jessicaland DC 67058-9373

This information is being furnished to the Internal Revenue Service.

Department of the Treasury--Internal Revenue Service

Allocated tips

56917.12

272

REISSUED a Employee's social security number 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 764-03-4042 OMB No. 1545-0008 **STATEMENT** this income is taxable and you fail to report it. **b** Employer identification number Wages, tips, other compensation Federal income tax withheld 65-5276512 75787.99 9178.66 c Employer's name, address, and ZIP code Social security wages Social security tax withheld Richardson, Wilson and Ward PLC 6287.09 82184.12 Medicare wages and tips Medicare tax withheld 1024 Black Burgs Suite 275 56917.12 1650.6

5070

Cut here. Keep lower portion for your records.

d Control number Advance EIC payment 10 Dependent care benefits 4142460 e Employee's first name and initial See instructions for box 12 Last name Nonqualified plans 12a 222 Thomas Baker 13 Statutory Third-party employee sick pay

7066 3492 Hendricks Ridge Apt. 345 670 X X Other (see enclosed Notice to Employee) 12c 81136-7159 Wallaceland OH 845 12d 511 D

Social security tips

82184.12

f Employee's address and ZIP code 16 State wages, tips, etc. 15 State Employer's state ID number 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 10642.36 2939.86 856-80-395 40366.54 55318.86 WA Duarte Corners 430-48-337 37945.08 56220.83 MT 2815.03 8216.24 Shelton Greens

Wage and Tax

Statement Form W-2 Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

