REISSUED a Employee's social security numb		Safe, Accurate, Visit the IRS Website							
STATEMENT 611-66-82	2 14 OMB N	No. 1545-0008	FAST! Use		at w	ww.irs.gov/efile.			
b Employer identification number	•	1 Wages	s, tips, other compensation	2	Federal incon	ne tax withheld			
22-2198177			84931.45			10425.86			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Waller LLC LLC			85900.5			6571.39			
446 Michael Spring Suttonhaven FL 26554-8667			5 Medicare wages and tips			6 Medicare tax withheld			
			.913.11		1795.48				
			7 Social security tips			8 Allocated tips			
			5900.5			913.11			
d Control number		9 Advan	ice EIC payment	10	Dependent ca				
6271870						208			
e Employee's first name and initial Last name		11 Nonqu	alified plans	12a	See instruct	ions for box 12			
Charles Crane			104			D 3767			
			13 Statutory Retirement Third-party employee plan sick pay						
268 Matthews Wall Apt. 721			plan sick pay		68	9			
Cookside TX 86511-0938			14 Other (see enclosed Notice to Employee)			12c			
						8			
				12d					
					32	5			
f Employee's address and ZIP code									
15 State Employer's state ID number 16 State wage	s, tips, etc. 17 State income tax	18	Local wages, tips, etc.	19 Local in	come tax	20 Locality name			
OH 796-47-127 44180.	98 3327.44	85976.53 12105.83		Sanders Via					
AZ 834-32-779 42319.	2726.68	85	209.02	15637	. 42	Laura Cove			

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 **Statement**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 soci	al 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						
ST	TATEMENT	6	11-66-8214	OMB N	OMB No. 1545-0008 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 Employ	b Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld			
22-2198177			84931.45			10425.86					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Waller LLC LLC					85900.5			6571.39			
446 Michael Spring Suttonhaven FL 26554-8667				5 Medicare wages and tips			6 Medicare tax withheld				
				61913.11			1795.48				
				7 Social security tips			8 Allocated tips				
				85900.5			61913.11				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
6271870						208					
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for bo				for box 12				
Charles Crane			104 13 Statutory Retirement Third-party			D 3767					
			employee plan sick pay			12b		l			
268 Matthews Wall Apt. 721								689			
Cookside TX 86511-0938			14 Other (see enclosed Notice to Employee)			12c					
							E	758			
							ŀ	12d			
								325			
f Employ 15 State	yee's address and ZIP cod Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10.1	ocal inc	omo tov		20 Locality name
			9 . , .			= ' ' '					,
ОН	796-47	/ – T	44180.98	3327.44		85976.53	12	105	. ೮೨		Sanders Via
AZ	834-32	2-779	42319.19	2726.68		85209.02	15	637	. 42		Laura Cove

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

