REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website								
S	TATEMENT	59	3-28-1477	OMB N	No. 1545-000	8 FAST! Use			at www.i	rs.gov/efile.		
b Employer identification number					1 Wa	1 Wages, tips, other compensation			Federal income tax withheld			
41-4548969						119094.47			28263.54			
c Emplo	oyer's name, address, and 2	IP code			3 So	3 Social security wages			4 Social security tax withheld			
Watkins LLC Inc						93345.95			7140.97			
7904 Garrett Field									6 Medicare tax withheld			
						104621.76			3034.03			
Krystalberg ME 67542-1893						7 Social security tips			8 Allocated tips			
						93345.95			104621.76			
d Control number					9 Ad	9 Advance EIC payment			10 Dependent care benefits			
4739602									137			
e Emplo	byee's first name and initial	Last name			11 No	11 Nonqualified plans			12a See instructions for box 12			
	** 1.1	-			109			G 1166				
	Heather	Love			13 Statutory Retirement Third-party employee plan sick pay							
571 Alexander Via Suite 002 South Patricia NV 47978-5589									P 579			
					14 Ot	ner (see enclosed Notice to Emplo	yee)	12c	l			
									P 381			
								480				
f Employee's address and ZIP code							-		100			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	<u> </u>	18 Local wages, tips, etc.	19 Lo	cal income tax		20 Locality name		
TN	352-72	-616	63044.67	4215.42		154210.12	237	750.0		Martin Greens		
RI	233-85	-331	55115.43	3930.33	:	149716.09	151	5167.31		Mathis Rest		
Wage and Tax					Department of the TreasuryInternal Revenue Service							
Form W-2 Statement												

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.

R	EISSUED	a Employee's soci	al security number	This information is being furnished to the Internal Revenue Service. If you are required								
ST	ATEMENT	59	93-28-1477	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 Employer identification number					1 Wages, tips, other compensation			2	2 Federal income tax withheld			
41-4548969					119094.47				28263.54			
c Employer's name, address, and ZIP code					3 Social security wages			4	4 Social security tax withheld			
Watkins LLC Inc					93345.95			'	7140.97			
7904 Garrett Field					5 Medicare wages and tips				6 Medicare tax withheld			
					104621.76				3034.03			
-	Krystalberg ME 67542-1893				7 Social security tips			8	8 Allocated tips			
					93345.95				104621.76			
d Control number						9 Advance EIC payment			10 Dependent care benefits			
4739602									137			
e Employee's first name and initial Last name					11 Nonqualified plans			12a	12a See instructions for box 12			
,	Heather Love 571 Alexander Via Suite 002				109				G 1166			
•					13 State	*	Third-party sick pay	12b		ı		
									P 579			
South Patricia NV 47978-5589					14 Other (see enclosed Notice to Employee)			e) 12c	12c			
	5040H 14011014 HV 17570 5505					ļ			P	381		
								12d				
									480			
f Employee's address and ZIP code						Tage to the second		10 1 11			Loo I II	
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		19 Local i		(20 Locality name	
TN	352-72	2-616	63044.67	4215.42	154210.12 2		23750	23750.0		Martin Greens		
RI	233-85	5-331	55115.43	3930.33	149716.09		1516	7.31	Mathis Rest			

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

