REISSUED	a Employee's soci	al security number			Safe, A	curate,			√isit the I	RS Website	
STATEMEN	T 1	52-95-3720	OMB N	o. 1545-00	008 FAST!	Jse T	e≁fi	E a	at www.ir	s.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation			2	Federal income tax withheld			
24-0979157				200132.82			2	28007.09			
c Employer's name, add	ess, and ZIP code			3 Social security wages				4 Social security tax withheld			
Bates-Thomas Ltd				227580.54				17409.91			
389 Kevin River Suite 997 East Leslieburgh MN 33957-1841				5 Medicare wages and tips				6 Medicare tax withheld			
				255901.55				7421.14			
				7 Social security tips				8 Allocated tips			
				227580.54				255901.55			
d Control number				9 Advance EIC payment			10	10 Dependent care benefits			
1335070								259			
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12			
James Mcdaniel				162				3774			
				13 Statutory Retirement Third-party employee plan sick pay			12b				
98272 Powell Pike				X Sick pay				634			
Greenside DC 64118-4842				14 Other (see enclosed Notice to Employee)			ee) 12c				
								G :	342		
							12d				
								L	000		
								299			
f Employee's address ar 15 State Employer's s	id ZIP code state ID number	16 State wages, tips, etc.	17 State income tax	<u> </u>	18 Local wages, tip	s oto	19 Local inc	omo tov		20 Locality name	
		=			3 · , , , , ,			30878.9		•	
IL 56	5-93-689	103732.76	3793.24		205502.4	D	30878	. y		Victoria Stream	
FL 34	3-40-530	99862.25	5714.17		191625.8	3	23084	.86		Amy Loaf	

Wage and Tax Statement 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 socia	•		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							
S1	TATEMENT	15	52-95-3720	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Employ	b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld				
24-0979157					200132.82			28007.09				
c Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Bates-Thomas Ltd					227580.54			17409.91				
389 Kevin River Suite 997					5 Medicare wages and tips			6 Medicare tax withheld				
					255901.55			7421.14				
East Leslieburgh MN 33957-1841				7 Social security tips			8 Allocated tips					
				227580.54			255901.55					
d Contro	d Control number				9 Advance EIC payment			10 Dependent care benefits				
	1335070								259			
e Emplo	e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
James Mcdaniel 98272 Powell Pike Greenside DC 64118-4842				162			3774					
				13 Statutory Retirement Third-party employee Plan Sick pay X Other (see enclosed Notice to Employee)			12b	i				
							634					
							12c					
01001100 20 01110 1012			G				342					
							12d					
							299					
f Employee's address and ZIP code					T				1			
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		1.0 = 1.0		9 Local income tax		20 Locality name		
IL	565-93	3-689	103732.76	3793.24		205502.48 3		30878.9		Victoria Stream		
FL	343-40)-530	99862.25	5714.17		191625.83 23		23084.86		Amy Loaf		

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

