REISSUED a Employee's social security number				S	afe, Accurate,	260	H	Visit the	IRS Website
STATEMENT 614-	56-2790	OMB No.	. 1545-0	008 F	AST! Use	£ 1	file	at www.i	rs.gov/efile.
b Employer identification number			1 Wages, tips, other compensation				Federal income tax withheld		
16-6429205			80201.26				26975.67		
c Employer's name, address, and ZIP code			3 Social security wages				4 Social security tax withheld		
White LLC Ltd			103786.83				7939.69		
935 Stephanie Estates			5 Medicare wages and tips			,	6 Medicare tax withheld		
Garciaburgh DE 55835-6536			86036.95				2495.07		
			7 Social security tips			'	8 Allocated tips		
			103786.83				86036.95		
d Control number			9 Advance EIC payment			10	10 Dependent care benefits		
9724042								261	
e Employee's first name and initial Last name			11	Nonqualified pl	ans	1	2a See in	structions	for box 12
			291				G 9807		
Lauren Bautista		13 Statutory Retirement Third-party employee plan sick pay			1	2b	i		
8602 Davis Track Suite 085			X Sick pay				н 184		
New Anna MT 07171-7559			14 Other (see enclosed Notice to Employee)			yee) 1	12c		
New Innia HI 0/1/1 /333							G	996	
		1				12d			
								425	
f Employee's address and ZIP code								1	
15 State Employer's state ID number 16 S	State wages, tips, etc.	17 State income tax		18 Local wa	ges, tips, etc.	19 Loca	al income ta	х	20 Locality name
NE 060-98-754 43	196.01	2352.72		57589	. 61	1283	37.22		Catherine Mews
NE 372-04-633 37	776.98	2893.6		63054	. 96	158	77.87		Dennis Burgs

Wage and Tax

Form W-2 Statement

5070

Department of the Treasury--Internal Revenue Service

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.

	to file a tax return, a negligence penalty or other sanction may be imposed on y	This information is being furnished to the Internal Revenue Service. If you are required							
STATEMENT 614-56-2790 OME	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 Federal income tax withheld	Federal income tax withheld							
16-6429205	80201.26 26975.67	26975.67							
c Employer's name, address, and ZIP code	3 Social security wages 4 Social security tax withheld	4 Social security tax withheld							
White LLC Ltd	103786.83 7939.69	7939.69							
935 Stephanie Estates	5 Medicare wages and tips 6 Medicare tax withheld								
Garciaburgh DE 55835-6536		2495.07							
Galciabulgii DE 33033 0330	7.	8 Allocated tips							
	103786.83 86036.95								
d Control number	9 Advance EIC payment 10 Dependent care benefits								
9724042	261								
e Employee's first name and initial Last name	11 Nonqualified plans 12a See instructions for box 12								
	291 G 9807	G 9807							
Lauren Bautista	13 Statutory Retirement Third-party 12b								
8602 Davis Track Suite 085	employee plan sick pay H 184								
New Anna MT 07171-7559	14 Other (see enclosed Notice to Employee) 12c								
New Anna MT 07171-7559	C 006	G 996							
	12d								
	425								
f Employee's address and ZIP code									
15 State Employer's state ID number 16 State wages, tips, etc. 17 State income to		ame							
NE 060-98-754 43196.01 2352.72	57589.61 12837.22 Catherine	Mews							
NE 372-04-633 37776.98 2893.6	63054.96 15877.87 Dennis B	Burgs							

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

