REISSUED a Employee's s	social security number		Safe, Accurate, Visit the IRS Website								
STATEMENT	828-08-3563	OMB N	o. 1545-00	008 <b>FAS</b> 1	「! Use	G I	le )	at www.irs	s.gov/efile.		
<b>b</b> Employer identification number			1 V	Vages, tips, other	compensation	2	Federal	income tax	withheld		
10-2746095				245797.42				84827.39			
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld			
Foster-Bennett PLC				224347.0				17162.55			
41657 Henderson Falls Apt. 613 Markmouth WY 49615-0809			5 Medicare wages and tips				6 Medicare tax withheld				
			196902.38				5710.17				
			7 Social security tips				8 Allocated tips				
				224347.0			196902.38				
d Control number			9 A	dvance EIC paym	ent	10	Depend	lent care be	nefits		
8892863							179				
e Employee's first name and initial Last r	name		11 N	lonqualified plans		12a	See ins	structions fo	or box 12		
Gabrielle Taylor			238				D 1745				
			13 Statutory Retirement Third-party			12b					
08591 Blair Well Apt. 558			employee plan sick pay				G 941				
Evelynstad DE 13314-5845			14 Other (see enclosed Notice to Employee)			yee) 12c		i			
								429			
						12d		1			
								684			
f Employee's address and ZIP code											
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages	• •	19 Local in			20 Locality name		
IA 922-23-785	126688.83	7812.94		264146.	25	32779	.85		Dustin Pines		
VT 846-34-034	131057.15	10923.87		235236.	46	44132	.37		Brian Ranch		

Wage and Tax 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.

F	REISSUED	a Employee's soc	ial security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT	8	28-08-3563	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 Federal income tax withheld				
10-2746095				245797.42			84827.39				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Foster-Bennett PLC			224347.0			17162.55					
41657 Henderson Falls Apt. 613 Markmouth WY 49615-0809			5 Medicare wages and tips			6 Medicare tax withheld					
				196902.38		5710.17  8 Allocated tips					
			7	Social security tips							
				224347.0			196902.38				
d Control number			9 Advance EIC payment			10 Dependent care benefits					
8892863							179				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Gabrielle Taylor			238			D 1745					
			13 Sta			12b					
08591 Blair Well Apt. 558			em	ployee plan sick pay		G	941				
_			14	Other (see enclosed Notice to Employe	00)	12c	711				
Evelynstad DE 13314-5845			THE Cities (see enclosed Notice to Employee)			120	1				
						429					
								12d	i		
						684					
	yee's address and ZIP coo										
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	
IA	922-23	3-785	126688.83	7812.94		264146.25	32	32779.85		Dustin Pines	
VT	846-34	1-034	131057.15	10923.87		235236.46	44	132.37		Brian Ranch	

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

