REIS	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website					
STATE	EMENT	30	9-40-3113	OMB	No. 1545-	0008 F .	AST! Use	J	7 1111	e	at www.i	rs.gov/efile.	
b Employer iden	ntification number				1	1 Wages, tips, other compensation				2 Federal income tax withheld			
45-	9050971					225818.61				73788.8			
c Employer's name, address, and ZIP code					3	3 Social security wages				4 Social security tax withheld			
Williams-Hall Ltd						237193.23				18145.28			
540 Johnson Burgs Suite 049 Stephanietown WY 19166-4491					5	a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a				6 Medicare tax withheld			
						168290.61				4880.43			
					7	7 Social security tips				8 Allocated tips			
						237193.23			168290.61				
d Control number					9	9 Advance EIC payment 1			10	10 Dependent care benefits			
7141509									185				
e Employee's fir	rst name and initial	Last name			11	11 Nonqualified plans			12a See instructions for box 12				
						193			4955				
Cnr	Christopher Long				13 Statutory Retirement Third-party employee plan sick pay				12b				
7537 Karina Burgs Apt. 147						X X			470				
Lake Josephstad AK 11762-82					14	14 Other (see enclosed Notice to Employee)			12c				
											360		
										12d			
										P	803		
f Employee's address and ZIP code								ŀ					
	ployer's state ID nu		16 State wages, tips, etc.	17 State income ta	ax	18 Local wa	iges, tips, etc.	19 L	Local inco	me tax		20 Locality name	
KS	161-36	-569	110365.56	9767.55		256017.19 2		28	8693.66			Matthew Trail	
CA	395-41	-108	114235.59	11892.38		22295	2.3	31	799.	17		Morris Mews	

Wage and Tax Statement

Form W-2

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.

REISSUED	a Employee's socia	al security number			This information is being furnis						
STATEMENT	30	09-40-3113	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					Vages, tips, other compensation		2 Federal income tax withheld				
45-9050971					225818.61		73788.8				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Williams-Hall Ltd					237193.23			18145.28			
540 Johnson Burgs Suite 049 Stephanietown WY 19166-4491					Medicare wages and tips		6 Medicare tax withheld				
					168290.61		4880 . 43 8 Allocated tips				
					Social security tips						
					237193.23		168290.61				
d Control number					dvance EIC payment		10 Dependent care benefits				
7141509							185				
e Employee's first name and init	al Last name	е		11 Nonqualified plans			12a See instructions for box 12				
Christopher Long					193 13 Statutory Retirement Third-party			4955			
7537 Karina Burgs Apt. 147				employee plan sick pay			470				
Lake Josephstad AK 11762-82					Other (see enclosed Notice to Employ	yee)	12c				
							360				
						-	12d				
						L	P	803			
f Employee's address and ZIP code 15 State Employee's state ID number 16 State wages, tips, etc. 17 State income tax					140 1 1:	140.1	ocal income tax		20 1		
		16 State wages, tips, etc.							20 Locality name		
KS 161-3	6-569	110365.56	9767.55		256017.19	280	693.66		Matthew Trail		
CA 395-4	1-108	114235.59	11892.38		222952.3	31	799.17		Morris Mews		

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

