REIS	REISSUED a Employee's social security number				Safe, Accurate,				o v f	Visit the IRS Website			
STAT	TEMENT	46	0-36-4180	OMB N	o. 1545-0	8000	FAST! Us	e		9	at www.i	rs.gov/efile.	
b Employer id	dentification number				1	1 Wages, tips, other compensation				Federal income tax withheld			
90-5417448				180042.88				3	35865.16				
c Employer's name, address, and ZIP code				3 Social security wages				4	4 Social security tax withheld				
Livingston-Mckinney Inc				193324.43				1	14789.32				
927 Jones Roads					5 Medicare wages and tips				6				
Lake Janice RI 64319-7974					162018.79					4698.54			
Hake ballice KI 04319-7974					7 Social security tips			8					
					193324.43				162018.79				
d Control number					9 Advance EIC payment			10	10 Dependent care benefits				
4503604										109			
e Employee's	e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
	-111				105				н 2559				
Michelle Long					13 Statutory Retirement Third-party employee plan sick pay				12b				
47890 Taylor Village Suite 861				employee plan sick pay				н	416				
Bakerfurt AK 49350-0801					14 Other (see enclosed Notice to Employee)				e) 12c		l		
Buncifult Int 43550 0001									G	920			
			İ			12d	12d						
										G	644		
f Employee's	address and ZIP code	2									011		
	Employer's state ID nur		16 State wages, tips, etc.	17 State income tax		18 Loca	wages, tips, e	etc. 1	19 Local inc	come tax		20 Locality name	
VT	535-32	-981	81992.14	5364.81		1472	76.56	1	19938	.53		Katrina Spring	
ID	608-46	-461	93407.86	7061.59		1729	32.69	2	22092	.19		Anthony Parkway	

Wage and Tax

5070 **Statement**

Department of the Treasury--Internal Revenue Service

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.

REISSUED	a Employee's soc	ial security number							vice. If you are required			
STATEMENT	STATEMENT 460-36-4180 OMB N				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			Federal income tax withheld				
90-5417448					180042.88		35	35865.16				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Livingston-Mckinney Inc					193324.43			14789.32				
927 Jones Roads					Medicare wages and tips		6 M	• modical o tax maniola				
					162018.79			4698.54				
Lake Janice RI 64319-7974					7 Social security tips			8 Allocated tips				
					193324.43			162018.79				
d Control number	d Control number					9 Advance EIC payment			10 Dependent care benefits			
4503604	4503604							109				
e Employee's first name and	initial Last nam	ne		11	11 Nonqualified plans			12a See instructions for box 12				
	_				105			н 2559				
Michell	Michelle Long					13 Statutory Retirement Third-party						
47890 Taylor Village Suite 861					employee plan sick pay			н 416				
					14 Other (see enclosed Notice to Employee) 12c							
Bakerfurt AK 49350-0801								020				
								G 920				
								I				
							(644				
f Employee's address and									_			
15 State Employer's state	e ID number	16 State wages, tips, etc.	17 State income to	ax	18 Local wages, tips, e	tc. 19	9 Local incor	ne tax	20 Locality name			
VT 535	-32-981	81992.14	5364.81		147276.56	1	9938.	53	Katrina Spring			
ID 608	-46-461	93407.86	7061.59		172932.69	2	22092.	19	Anthony Parkway			

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

