REISSUED a Emp	loyee's social security number			Safe, Accurate,	re D	A H C	Visit the IRS Website		
STATEMENT	778-80-2494	OMB No	o. 1545-00	08 FAST! Use	5	<b>file</b>	at www.irs.gov/efile.		
<b>b</b> Employer identification number			1 V	lages, tips, other compensation		2 Federa	al income tax withheld		
50-6464047				74404.73			15113.03		
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld		
Bush Inc Inc				66248.22			5067.99		
005 Clayton Shore Suite 794			5 N	ledicare wages and tips		6 Medicare tax withheld			
_			86188.11			2499.46			
Whitebury NM 65820-6541			7 Social security tips			8 Allocated tips			
				66248.22			86188.11		
d Control number			9 A	dvance EIC payment		10 Depen	dent care benefits		
3945479							128		
e Employee's first name and initial	Last name		11 N	onqualified plans		12a See in	structions for box 12		
				100		E	6402		
Daniel Coo	ke		13 Statu			12b			
474 Moore Spur				employee plan sick pay			784		
Karenside	14 Other (see enclosed Notice to Employee)			12c					
Karenside NY 69982-2113						н	541		
						12d			
							435		
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, tips, etc.	19 Lo	cal income ta	20 Locality name		
CO 747-49-679	39910.61	2736.55		81410.21	778	781.72 Mary Islan			
ID 913-28-021	L 37835.85	2333.91		52765.74	910	06.0	Salazar Corner		

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 furnished to the Internal Revenue Service. If you are required								
STATEMENT	77	78-80-2494	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					
50-6464047				74404.73			15113.03					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Bush Inc Inc				66248.22			5067.99					
005 Clayton Shore Suite 794 Whitebury NM 65820-6541				5 Medicare wages and tips			6 Medicare tax withheld					
				86188.11 7 Social security tips			2499.46					
							8 Allocated tips					
				66248.22			86188.11					
d Control number				9 Advance EIC payment			10 Dependent care benefits					
3945479							128					
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box			for box 12						
David Carlo			100			E 6402						
Daniel Cooke 474 Moore Spur Karenside NY 69982-2113				13 Statutory Retirement Third-party employee plan sick pay			12b	ı				
				Citipio	X Sick play		H	784				
				14 Other (see enclosed Notice to Employee)			12c					
1111201102110								541				
				ļ			12d					
								435				
f Employee's address and ZIP code												
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax		20 Locality name			
CO 747-4	9-679	39910.61	2736.55		81410.21	778	81.72		Mary Islands			
ID 913-2	8-021	37835.85	2333.91		52765.74	910	06.0		Salazar Corner			

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

