REISSUED	EISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website		
STATEMENT	17	74-41-3224	OMB N	o. 1545-00	DOS FAST!	Use	E TI	e at v	vww.irs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation			2	2 Federal income tax withheld		
26-6507014				128967.4			3	37481.89		
c Employer's name, address, a	nd ZIP code			3 Social security wages			4	4 Social security tax withheld		
Huffman Ltd Ltd				119139.29			9	9114.16		
3276 Timothy Dam Suite 369				5 Medicare wages and tips			6			
Amberstad WY 71833-9359				165363.71				4795.55		
Amberstad wi /1033-9339			7 Social security tips			8	8 Allocated tips			
				119139.29				165363.71		
d Control number			9 /	Advance EIC paymer	nt	10	•	care benefits		
9003356								105		
e Employee's first name and initial Last name			11 Nonqualified plans			12a	12a See instructions for box 12			
Dr. Nicholas			255				6937			
			13 Statutory Retirement Third-party employee plan sick pay			12b	12b			
3948 Walker Lane Suite 678				employee plan sick pay				P 950		
Jacksonfurt AZ 42315-0739			14 (Other (see enclosed	Notice to Employe	ee) 12c	1			
							96	54		
						12d	12d			
								P 46	57	
f Employee's address and ZIP	code							ı		
15 State Employer's state ID	number	16 State wages, tips, etc.	17 State income tax		18 Local wages, ti	ps, etc.	19 Local inc	ome tax	20 Locality name	
NM 121-9	93-769	68623.79	2859.85		167582.5	59	23713	. 61	Tanya Mountain	
ME 849-2	28-950	58711.82	2835.47		116131.5	57	19839	.13	Cynthia Brooks	

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 **Statement**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 soci	•		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if						
S	TATEMENT	1'	74-41-3224	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld				
26-6507014					128967.4			37481.89			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Huffman Ltd Ltd				119139.29			9114.16				
3276 Timothy Dam Suite 369 Amberstad WY 71833-9359				5 Medicare wages and tips			6 Medicare tax withheld				
				165363.71			4795.55				
				7 Social security tips			8 Allocated tips				
				119139.29			165363.71				
d Contro	d Control number				9 Advance EIC payment			10 Dependent care benefits			
9003356							105				
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Dr. Nicholas				255			6937				
				13 Statu			12b	1			
3948 Walker Lane Suite 678				employee plan sick pay			P 950				
Jacksonfurt AZ 42315-0739				14 (Other (see enclosed Notice to Employ	ree)	12c				
							964				
								12d			
								P	P 467		
f Employee's address and ZIP code											
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		3.7,1,7,		Local income tax		20 Locality name	
NM	121-93	3-769	68623.79	2859.85		167582.59	23	713.61	•	Tanya Mountain	
ME	849-28	-950	58711.82	2835.47		116131.57	19	839.13	3	Cynthia Brooks	

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

