F	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website				
S	TATEMENT	61	.3-04-2522	OMB N	o. 1545-0	008 FAST!	Use	G	IIIE	at www.i	rs.gov/efile.	
b Employer identification number					1 '	1 Wages, tips, other compensation			2 Federal income tax withheld			
73-2356711					147902.16				43415.37			
c Employer's name, address, and ZIP code					3 Social security wages			4	4 Social security tax withheld			
Hart-Reyes and Sons					113277.58				8665.73			
045 James Walk Suite 899 Kimbury WI 81857-7300					5 Medicare wages and tips			(6 Medicare tax withheld			
					111690.98				3239.04			
					7 Social security tips				8 Allocated tips			
					113277.58				111690.98			
d Contro	ol number				9 Advance EIC payment			10	10 Dependent care benefits			
7077833									227			
e Employee's first name and initial Last name					11 Nonqualified plans			1:	12a See instructions for box 12			
					253				7556			
	Thomas Mann					13 Statutory Retirement Third-party			2b			
0869 Owen Glen Suite 284 Richardside ND 83109-7153					employee plan sick pay				G	656		
					14 Other (see enclosed Notice to Employee)			yee) 1:	2c	ì		
									E	525		
								1:	12d			
										366		
f [vee's address and ZIP cod	_								300		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages,	tips, etc.	19 Loca	al income ta:	(20 Locality name	
NJ	331-17	-715	77615.43	2732.3		106911.27		2480	24805.75		Miller Extensions	
											†	
DC	590-86	590-86-366 74528.35 3165.02		189660.84 22		2270	22700.91		Green Green			

Wage and Tax Statement

Lax 5010

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.

REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service.							ice. If you are required					
						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.						
	r identification number				Wages, tips, other compensation			2 Federal income tax withheld				
73-2356711					147902.16			43415.37				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Hart-Reyes and Sons					113277.58			8665.73				
045 James Walk Suite 899					5 Medicare wages and tips			6 Medicare tax withheld				
						111690.98		3239.04				
K:	Kimbury WI 81857-7300					Social security tips		8 Allocated tips				
					113277.58			111690.98				
d Control number					9 Advance EIC payment			10 Dependent care benefits				
70	077833								227			
e Employee	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Thomas Mann				253 13 Statutory Retirement Third-party			7556					
0	0869 Owen Glen Suite 284				employee plan sick pay			G 656				
R	Richardside ND 83109-7153				14	Other (see enclosed Notice to Employee)		12c	ı			
								E 525				
								12d				
								366				
f Employee's address and ZIP code					Tra e e e	1.0.			Lag I III			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		10 =====g==,p=, ===		Local income tax		20 Locality name		
NJ	331-17	-715	77615.43	2732.3		106911.27 2		4805.75		Miller Extensions		
DC	590-86	-366	74528.35	3165.02		189660.84	22	700.91		Green Green		

Cut here. Keep lower portion for your records.

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

