F	REISSUED a Employee's social security number				Safe	, Accurate,	e D	a HD		isit the I	RS Webs	site	
S	TATEMENT	50	)5-20-9473	OMB N	o. 1545-0	008 <b>FAS</b>	T! Use	6		at	t www.ir	s.gov/efile	Э.
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld				
11-3870409					204930.35				67861.46				
<b>c</b> Emplo	yer's name, address, and 2	ZIP code			3 Social security wages				4 Social security tax withheld				
Fisher-Nichols LLC					192269.86				14708.64				
12538 Williams Station North Maurice AR 81457-3609					5 Medicare wages and tips				6 Medicare tax withheld				
					167820.69				4866.8				
					7 Social security tips				8 Allocated tips				
					192269.86				167820.69				
d Control number					9 Advance EIC payment 10 Dependent care benefits								
8939873									187				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
,					134				P 1880				
	Louis Adams				13 Statutory Retirement Third-party employee plan sick pay				12b	i			
9304 Samantha Street Port Michael IN 92291-7886				x x				801					
				14 Other (see enclosed Notice to Employee)			yee)	12c	1				
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										, ,	EA		
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15 State	eyee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	<u> </u>	18 Local wages	s. tips. etc.	19 Lo	cal incom	ne tax		20 Localit	v name
RI	378-10		106519.57	6767.04		181494	• • •		513.0			Bell	<b>^</b>
	370-10	<u> </u>	100319.37	0707.04		101494		15,6				DETT.	
MD	108-47	-894	101813.53	7624.8		179644	. 39	226	662.8	88		Cassidy	Mountain

Wage and Tax

Form W-2 Statement

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.

F	REISSUED a Employee's social security number					This information is being furnished to the Internal Revenue Service. If you are required							
S	<b>TATEMENT</b>	50	505-20-9473  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>b</b> Emplo	b Employer identification number					Vages, tips, other compensation	Federal income tax withheld						
11-3870409					204930.35			67861.46					
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld					
Fisher-Nichols LLC						192269.86			14708.64				
12538 Williams Station					5 1	Medicare wages and tips	6 Medicare tax withheld						
						167820.69	4866.8						
North Maurice AR 81457-3609					7 5	Social security tips	8 Allocated tips						
						192269.86	167820.69						
d Control number					9 Advance EIC payment			10 Dependent care benefits					
	8939873								187				
e Emplo	e Employee's first name and initial Last name					Nonqualified plans	12a See instructions for box 12						
Louis Adams						134			P 1880				
						tory Retirement Third-party	12b						
9304 Samantha Street Port Michael IN 92291-7886					employee plan sick pay				801				
					14 (	Other (see enclosed Notice to Employ	12c						
								G	474				
								12d					
									254				
	yee's address and ZIP co		_										
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Localit	•		
RI	378-10	)-197	106519.57	6767.04	181494.24 3		37	37613.05		Bell	Mill		
MD	108-47	7-894	101813.53	7624.8	179644.39 22		22	662.88	Cassidy Mountain				

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

