RE	REISSUED a Employee's social security number			Safe, Accurate,				/isit the I	RS Website			
STA	TEMENT	58	31-70-3222	OMB N	o. 1545-00	008 FAST!	Use	<i>5</i> ~ III	<i>e</i>	at www.ir	s.gov/efile.	
b Employer identification number						1 Wages, tips, other compensation			2 Federal income tax withheld			
36-2070087						248530.86			39081.08			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Davis Group LLC						194678.78			14892.93			
2500 Jason Row						5 Medicare wages and tips			6 Medicare tax withheld			
North Ronald MO 58361-1378						224705.04			6516.45			
North Ronald MO 58361-1378						7 Social security tips			8 Allocated tips			
						194678.78			224705.04			
d Control nu	umber				9 Advance EIC payment			10	10 Dependent care benefits			
13	357564								:	295		
e Employee's first name and initial Last name						11 Nonqualified plans			12a See instructions for box 12			
					101				D 7125			
Sara Randall						tory Retirement	Third-party	12b				
0488 Erin Knoll						oyee plan	sick pay		:	296		
Т.:	ake Corey	, SD	60228-2982		14 (Other (see enclosed N	lotice to Employe	e) 12c	i i			
	ane corey	, OB	00220 2302						G !	583		
								12d				
									.	145		
f Employee	's address and ZIP cod	0								143		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tip	s, etc.	19 Local inc	ome tax		20 Locality name	
MD	248-39	-070	114593.63	9799.81		318229.9	8	32401	. 39		Fisher Ridge	
NE	165-28	-859	113115.7	7086.1		284992.2	2	28277	.73		Jefferson Ways	

Wage and Tax

Form W-2 Statement

5010

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 social securit	REISSUED a Employee's social security number			This information is being furnished to the Internal Revenue Service. If you are required					
STATEMENT 581-7	0-3222	OMB No. 1545-0	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 Federa	l income tax withheld				
36-2070087			248530.86	3908	39081.08				
c Employer's name, address, and ZIP code		3	Social security wages	4 Social s	4 Social security tax withheld				
Davis Group LLC			194678.78	1489	14892.93				
2500 Jason Row		5	Medicare wages and tips	6 Medica	• Modrodro tax marriord				
North Ronald MO	58361-1378		224705.04		6516.45				
North Rohald MO	36361-1376	7	Social security tips	8 Allocate	8 Allocated tips				
			194678.78		224705.04				
d Control number		9	Advance EIC payment	10 Depend	dent care benefits				
1357564					295				
e Employee's first name and initial Last name		11	Nonqualified plans	12a See ins	12a See instructions for box 12				
			101	D	D 7125				
Sara Randall		13 Stat		12b					
0488 Erin Knoll		emp X	loyee plan sick pay		296				
Lake Corey SD 6	0228-2982	14	Other (see enclosed Notice to Emplo	yee) 12c					
Lake Coley SD 6	0220-2902			G	583				
				12d	363				
				124					
					145				
f Employee's address and ZIP code	T.= -		T		T				
. ,		e income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name				
MD 248-39-070 114	593.63 9799	9.81	318229.98	32401.39	Fisher Ridge				
NE 165-28-859 113	708	6.1	284992.22	28277.73	Jefferson Ways				

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

