R	REISSUED a Employee's social security number				Safe, Accurate, Visit the IR					IRS Web	site			
ST	ATEMENT	54	17-30-2881	OMB N	lo. 1545-	0008 F	AST! Use	G	7 111	e	at www.i	rs.gov/ef	ile.	
b Employer identification number					1	1 Wages, tips, other compensation			2 Federal income tax withheld					
14-1909837						197861.22				39883.55				
c Employer's name, address, and ZIP code					3	3 Social security wages				4 Social security tax withheld				
Black Group PLC					148507.67				11360.84					
005 Scott Pines					5 Medicare wages and tips				6 Medicare tax withheld					
West Jasonport IA 83055-3758					164465.15				4769.49					
West Jasonport IA 83055-3758					7 Social security tips				8 Allocated tips					
					148507.67				164465.15					
d Control number					9	Advance EIC p	ayment		10	Depend	lent care be	enefits		
3	3299027								265					
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12					
- 1					223				E 7585					
Zachary Miller 741 Daniel Estate Apt. 569 West Williamville MS 25536-0095						13 Statutory Retirement Third-party employee plan sick pay					ı			
											291			
						14 Other (see enclosed Notice to Employee)				12c				
										P	168			
										12d				
										E	650			
f Employ	ee's address and ZIP cod	Δ.									000			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	-	18 Local wa	ges, tips, etc.	19	Local inc	ome tax		20 Loca	lity name	
CT	676-43	-421	99657.78	6803.97		238355.4 3		38	38102.46			Mary	Islands	
OK	925-51-563 90088.23 7820.51			198682.91 3			35	35030.25			Holmes	s Canyon		

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 security number				This information									
STATEMENT 547-30-2881 OMB NO.					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					Wages, tips, other compensation			2 Federal income tax withheld					
14-1909837					197861.22			39883.55					
c Employer's name, address, and	3 S	3 Social security wages			4 Social security tax withheld								
Black Group PLC					148507.67				11360.84				
005 Scott Pines					5 Medicare wages and tips				6 Medicare tax withheld				
West Jason		164465.15				4769.49							
west Jason	7 S	7 Social security tips				8 Allocated tips							
		148507.67				164465.15							
d Control number					9 Advance EIC payment			10 Dependent care benefits					
3299027									265				
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
Zachary Miller					223			E 7585					
Zachary	13 Statutory Retirement Third-party employee plan sick pay					i							
741 Danie	employee plan sick pay				291								
West Will	14 C	14 Other (see enclosed Notice to Employee)				12c							
									P 168				
								12d					
					E	650							
f Employee's address and ZIP code									L				
15 State Employer's state ID r	number	16 State wages, tips, etc.	17 State income t	tax	18 Local wages, tips, etc. 19		19 Local in	9 Local income tax			/ name		
CT 676-4	3-421	99657.78	6803.97		238355.4		38102.46			Mary I	slands		
OK 925-5	51-563 90088.23 7820.51			198682.91		35030.25			Holmes	Canyon			

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

