REIS	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website							
STAT	EMENT	11	L7-23-9223	OM	MB No. 1545-00	08 FAST! Use		≁file >	at www.i	rs.gov/efile	<b>)</b> .	
<b>b</b> Employer identification number					1 V	1 Wages, tips, other compensation			Federal income tax withheld			
30-5639984						214024.42			68750.47			
c Employer's name, address, and ZIP code					<b>3</b> S	3 Social security wages			4 Social security tax withheld			
Watts, Thompson and Schroeder LLC						248305.16			18995.34			
70499 Dustin Inlet					5 N	5 Medicare wages and tips			6 Medicare tax withheld			
10000 - 000000						176731.12			5125.2			
, na	Kaylafurt CT 07142-3361				7 S	7 Social security tips			8 Allocated tips			
						248305.16			176731.12			
d Control number					9 A	9 Advance EIC payment			10 Dependent care benefits			
418768									219			
e Employee's	first name and initial	Last name			11 N	11 Nonqualified plans			12a See instructions for box 12			
~1						116			н 6434			
CI	audia	Miller			13 Statut		12b					
9942 Parker Lodge Suite 268					emplo	yee plan sick pa	E 837					
West Elizabethtown MN 39548-0					14 C	ther (see enclosed Notice to Em	ployee)	12c	1			
									207			
							12d					
								112				
f Employee's	address and ZIP code	a							112			
	Employer's state ID nu		16 State wages, tips, etc.	17 State income	tax	18 Local wages, tips, etc.	19	Local income tax		20 Locality	name	
MO	169-52	-120	106362.02	4208.52		258356.85	37	7671.98		Derek	Corner	
WY	545-65	-996	107914.69	4708.91		245575.67	5575.67 35		5961.34		Path	
Wage and Tax Statement  Vage and Tax				l·Π	Department of the TreasuryInternal Revenue Service							

**Statement** Form W-2 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	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
S	TATEMENT	1:	17-23-9223	OMB t	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>b</b> Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld			
30-5639984						214024.42			68750. <b>4</b> 7			
<b>c</b> Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Watts, Thompson and Schroeder LLC					248305.16				18995.34			
70499 Dustin Inlet					5 Medicare wages and tips				6 Medicare tax withheld			
					176731.12				5125.2			
	Kaylafurt CT 07142-3361					7 Social security tips			8 Allocated tips			
						248305.16			176731.12			
<b>d</b> Contro	ol number	9 Advance EIC payment				10 Dependent care benefits						
	418768						219					
e Emplo	yee's first name and initial	Last nam	е		11 Nonqualified plans				12a See instructions for box 12			
				116				н 6434				
	Claudia Miller				13 Statutory Retirement Third-party				12b			
9942 Parker Lodge Suite 268 West Elizabethtown MN 39548-0					employee plan sick pay				E	E 837		
					14 (	Other (see enclosed No	tice to Employ	(00)	12c			
					' `	outer (see enclosed 14e	acc to Emplo	,00,	120	1		
									207			
									12d	ı		
									112			
f Employee's address and ZIP code												
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips	, etc.	19 L	ocal income tax	:	20 Locality name	
MO	169-52	2-120	106362.02	4208.52		258356.85		37	37671.98		Derek Corner	
WY	545-65	5-996	107914.69	4708.91		245575.67	,	35	961.34		Price Path	

Wage and Tax

**Statement** Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

