


|   |  |   |  |   |  |   |  |
|---|--|---|--|---|--|---|--|
| <b>REISSUED STATEMENT</b>   |  | a Employee's social security number<br><b>764-40-4438</b> |  | Safe, Accurate,<br>FAST! Use                                     |  | Visit the IRS Website<br>at www.irs.gov/efile.    |  |
| b Employer identification number<br><b>66-5295978</b>   |  |   |  | 1 Wages, tips, other compensation<br><b>221270.79</b>   |  | 2 Federal income tax withheld<br><b>74951.67</b>  |  |
| c Employer's name, address, and ZIP code<br><b>Herrera-Miller Ltd</b><br><b>53709 Ewing Drives</b><br><b>Christopherton MD 60344-9873</b>               |  |   |  | 3 Social security wages<br><b>189526.56</b>   |  | 4 Social security tax withheld<br><b>14498.78</b> |  |
|   |  |   |  | 5 Medicare wages and tips<br><b>180386.54</b>   |  | 6 Medicare tax withheld<br><b>5231.21</b>         |  |
|   |  |   |  | 7 Social security tips<br><b>189526.56</b>  |  | 8 Allocated tips<br><b>180386.54</b>              |  |
| d Control number<br><b>3019116</b>  |  |   |  | 9 Advance EIC payment   |  | 10 Dependent care benefits<br><b>272</b>          |  |
| e Employee's first name and initial Last name<br><br><b>Courtney Christian</b><br><b>307 Miles Tunnel Apt. 491</b><br><b>Lake Caitlin KY 51294-4017</b> |  |   |  | 11 Nonqualified plans<br><b>279</b>   |  | 12a See instructions for box 12<br><b>P 7079</b>  |  |
|   |  |   |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> |  | 12b <b>P 666</b>                                  |  |
|   |  |   |  | 14 Other (see enclosed Notice to Employee)  |  | 12c <b>D 981</b>                                  |  |
|   |  |   |  |   |  | 12d <b>D 827</b>                                  |  |
| f Employee's address and ZIP code   |  |   |  | 15 State Employer's state ID number   |  | 16 State wages, tips, etc.                        |  |
| <b>TN</b>   |  | <b>479-75-809</b>   |  | <b>113060.9</b>   |  | <b>9842.44</b>                                    |  |
| <b>WY</b>   |  | <b>350-31-666</b>   |  | <b>120227.35</b>  |  | <b>11525.67</b>                                   |  |
|   |  |   |  | <b>230693.07</b>  |  | <b>31156.47</b>                                   |  |
|   |  |   |  |   |  | <b>26297.97</b>                                   |  |
|   |  |   |  |   |  | <b>Allison Meadows</b>                            |  |
|   |  |   |  |   |  | <b>Matthews Brook</b>                             |  |

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy B--To Be Filed with Employee's FEDERAL Tax Return  
This information is being furnished to the Internal Revenue Service.

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Cut here. Keep lower portion for your records.

|   |  |   |  |   |  |  |  |
|---|--|---|--|---|--|--|--|
| <b>REISSUED STATEMENT</b>   |  | a Employee's social security number<br><b>764-40-4438</b> |  | OMB No. 1545-0008   |  | This information is being furnished to the Internal Revenue Service. If you are required 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<br><b>66-5295978</b>   |  |   |  | 1 Wages, tips, other compensation<br><b>221270.79</b>   |  | 2 Federal income tax withheld<br><b>74951.67</b>   |  |
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|   |  |   |  | 7 Social security tips<br><b>189526.56</b>  |  | 8 Allocated tips<br><b>180386.54</b>   |  |
| d Control number<br><b>3019116</b>  |  |   |  | 9 Advance EIC payment   |  | 10 Dependent care benefits<br><b>272</b>   |  |
| e Employee's first name and initial Last name<br><br><b>Courtney Christian</b><br><b>307 Miles Tunnel Apt. 491</b><br><b>Lake Caitlin KY 51294-4017</b> |  |   |  | 11 Nonqualified plans<br><b>279</b>   |  | 12a See instructions for box 12<br><b>P 7079</b>   |  |
|   |  |   |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> |  | 12b <b>P 666</b>   |  |
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| f Employee's address and ZIP code   |  |   |  | 15 State Employer's state ID number   |  | 16 State wages, tips, etc.   |  |
| <b>TN</b>   |  | <b>479-75-809</b>   |  | <b>113060.9</b>   |  | <b>9842.44</b>   |  |
| <b>WY</b>   |  | <b>350-31-666</b>   |  | <b>120227.35</b>  |  | <b>11525.67</b>  |  |
|   |  |   |  | <b>230693.07</b>  |  | <b>31156.47</b>  |  |
|   |  |   |  |   |  | <b>26297.97</b>  |  |
|   |  |   |  |   |  | <b>Allison Meadows</b>   |  |
|   |  |   |  |   |  | <b>Matthews Brook</b>  |  |

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy C For EMPLOYEE'S RECORDS.  
(See enclosed Notice to Employee.)

Safe, accurate,  
FAST! Use

