F	REISSUED	SUED a Employee's social security number Safe, Accurate,				20 A	.∠GH		Visit the	IRS Website			
S	TATEMENT	35	57-59-4976	OMB 1	No. 1545-0	0008 <b>FA</b> \$	ST! Use	G	7111	e	at www.i	rs.gov/efile.	
<b>b</b> Employer identification number					1	Wages, tips, othe	er compensation		2 Federal income tax withheld				
71-9328568						194840.92			49603.51				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Anderson Ltd PLC						197071.56				15075.97			
572 Scott Walk Suite 392 Judyside WI 88423-2356					5 Medicare wages and tips				6 Medicare tax withheld				
					153185.87				4442.39				
					7 Social security tips				8 Allocated tips				
						197071.56			153185.87				
<b>d</b> Contro	ol number				9	9 Advance EIC payment			10 Dependent care benefits				
237996									246				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
manusa maalaa					252				2922				
	Tammy Taylor				13 Statutory Retirement Third-party employee plan sick pay				12b	1	1		
58949 Barber Curve					X X				957				
Port Bernardburgh SD 12714-8164						14 Other (see enclosed Notice to Employee)				12c			
Toto Bernarabargii BB 12711 0101										E	765		
									12d				
										E	975		
f Employee's address and ZIP code								-			3.0		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wag	es, tips, etc.	19 L	ocal inco	me tax		20 Locality name	
NJ	507-64	-129	96218.93	218.93 5082.68		224399.96 3		30	30546.88			Nathan Center	
СТ	782-36-975 97534.67 4808.28			238498.98 3		33	33567.93			Payne Radial			

Wage and Tax

5070 **Statement** Form W-2

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 to file a tax return, a negligence penalty or other sanction may be impose												
	STATEMENT					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			
71-9328568						194840.92			49603.51				
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld				
Anderson Ltd PLC						197071.56			15075.97				
572 Scott Walk Suite 392						5 Medicare wages and tips			6 Medicare tax withheld				
Judyside WI 88423-2356					153185.87				4442.39				
					7 Social security tips				8 Allocated tips				
					197071.56				153185.87				
d Control number						9 Advance EIC payment			10 Dependent care benefits				
	237996									246			
e Emplo	yee's first name and initial	11 Nonqualified plans			12a	12a See instructions for box 12							
	Tammy Taylor				252 13 Statutory Retirement Third-party				2922				
58949 Barber Curve Port Bernardburgh SD 12714-8164					mployee plan sick pay  X  14 Other (see enclosed Notice to Employee)				957				
								e) <b>12</b> 0	12c				
									E	765			
								120	i				
									E 975				
f Employee's address and ZIP code  15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax					18 Local wages, tips, etc. 19			19 Local	Local income tax 20 Locality name				
NJ	507-64		96218.93	5082.68		9		30546.88			Í		
NO	307-64	±-エ <b>ム</b> タ 	70210.73	5002.00		224333.30		3034	0.00		Nathan Center		
CT	782-36	6-975	97534.67	4808.28		238498.98		3356	7.93		Payne Radial		

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

