REISSUED a Employee's social security number	Safe, Accurate,  OMB No. 1545-0008  FASTI Use  The second of the second
STATEMENT 136-23-7292	at www.iis.gov/citic.
<b>b</b> Employer identification number	1 Wages, tips, other compensation 2 Federal income tax withheld
36-3405192	229323.81 41054.3
c Employer's name, address, and ZIP code	3 Social security wages 4 Social security tax withheld
Young-Anderson Ltd	247578.12 18939.73
6736 Mitchell Light	5 Medicare wages and tips 6 Medicare tax withheld
Johnsonburgh NH 42593-4312	201306.27 5837.88
Johnsonburgh Mi 42575 4512	7 Social security tips 8 Allocated tips
	247578.12 201306.27
d Control number	9 Advance EIC payment 10 Dependent care benefits
568704	287
e Employee's first name and initial Last name	11 Nonqualified plans 12a See instructions for box 12
Bahlas Bahisasa	186 G 1723
Ashley Robinson	13 Statutory Retirement Third-party 12b
610 David Course Suite 060	employee plan sick pay  E 878
East Yvonneside MO 67939-53	14 Other (see enclosed Notice to Employee) 12c
	905
	12d
	G 667
f Employee's address and ZIP code	
	ncome tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name
NH 467-95-045 124411.23 1244	1.47 233920.2 31502.88 Sean Centers
KS 242-49-651 119996.6 1215	5.73   231593.03   23872.77   Hamilton Summit

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 **Statement**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.

R	REISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required									
	TATEMENT	1:	36-23-7292	OMB N	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> Employer identification number					1	· · · · · · · · · · · · · · · · · · ·					Federal income tax withheld			
36-3405192						229323.81				41054.3				
c Employer's name, address, and ZIP code					3	3 Social security wages				4 Social security tax withheld				
Young-Anderson Ltd						247578.12				18939.73				
6736 Mitchell Light Johnsonburgh NH 42593-4312					5 Medicare wages and tips				6 Medicare tax withheld					
					201306.27				5837.88					
					7 Social security tips				8 Allocated tips					
					247578.12				201306.27					
d Control number					9	9 Advance EIC payment				10 Dependent care benefits				
	568704										287			
e Employee's first name and initial Last name				11 Nonqualified plans					12a See instructions for box 12					
Ashley Robinson				186				G 1723						
					tatutory	Retirement	Third-party		12b					
610 David Course Suite 060  East Yvonneside MO 67939-53					e	mployee	plan sick pay				E	878		
					14	Other (se	ee enclosed No	tice to Employ	yee)	12c				
East Ivonneside MO 6/939-33											005			
							905							
										120				
											G	667		
f Employee's address and ZIP code														
15 State	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	
NH	467-95	-045	124411.23	12444.47		233	3920.2		31	502	. 88		Sean Centers	
KS	242-49	-651	119996.6	12155.73		231	L593.03		23	872	. 77		Hamilton Summit	

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

