REISSUED a Employee's social security num	nber	Safe, Accurate, Visit the IRS Website					
STATEMENT 583-71-0)653 OMB1	No. 1545-0008 FAST! Use	at www.irs.gov/efile.				
b Employer identification number		1 Wages, tips, other compensation	2 Federal income tax withheld				
40-0420479		72019.45	25370.76				
c Employer's name, address, and ZIP code		3 Social security wages	4 Social security tax withheld				
Walsh Ltd Inc		60173.16	4603.25				
83527 Mcpherson Highway Su	ite 310	5 Medicare wages and tips	6 Medicare tax withheld				
Heatherburgh MI 62156-	1015	92194.95 7 Social security tips	2673.65				
	2020	1	8 Allocated tips				
1. O vital visit v		60173.16	92194.95				
d Control number		9 Advance EIC payment	10 Dependent care benefits				
5718460		AA Nooralii alaa	193				
e Employee's first name and initial Last name		11 Nonqualified plans	12a See instructions for box 12				
T-1:- W:11		292	4774				
Julie Miller		13 Statutory Retirement Third-party employee plan sick pay	12b				
722 Pearson Pine Apt. 8	83	employee plan sick pay	548				
Lake Alan NJ 74329-0	997	14 Other (see enclosed Notice to Employee	e) 12c				
			P 592				
			12d				
			р 997				
f Employee's address and ZIP code							
15 State Employer's state ID number 16 State was	ges, tips, etc. 17 State income tax	18 Local wages, tips, etc.	Local income tax 20 Locality name				
SD 462-74-468 36359	.38 1818.88	78863.49 1	3694.59 Jessica Key				
IL 223-69-237 35774	.67 1649.45	73089.19	9711.92 Massey Crossing				

Wage and Tax Statement

Form W-2

5070

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 soci	•		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														
S	TATEMENT	58	33-71-0653	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.														
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld												
40-0420479				72019.45			25370.76												
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld												
Walsh Ltd Inc				60173.16			4603.25												
83527 Mcpherson Highway Suite 310 Heatherburgh MI 62156-1015				5 Medicare wages and tips 92194.95 7 Social security tips			6 Medicare tax withheld 2673.65 8 Allocated tips												
														60173.16			92194.95		
										d Control number			9 Advance EIC payment			10 Dependent care benefits			
5718460				193			193												
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for bo			for box 12													
Julie Miller			292 13 Statutory Retirement Third-party employee plan sick pay			4774													
722 Pearson Pine Apt. 883							548												
Lake Alan NJ 74329-0997				14 Other (see enclosed Notice to Employee)			12c												
Lake Hian No 14323 0331							P	592											
								12d											
							D	D 997											
f Emplo 15 State	oyee's address and ZIP co Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10	Local income tax	,	20 Locality name									
	• •		9			3.,,,,,,,				1									
SD	462-74	4-468	36359.38	1818.88	78863.49 13694.59 Jessica		Jessica Key												
IL	223-69	9-237	35774.67	1649.45		73089.19	97	9711.92 Massey Crossing											

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

