REIS	REISSUED a Employee's social security number					Safe, Accurate,					Visit the	IRS Webs	ite	
STAT	EMENT	36	51-49-1960	OMB	No. 1545-0	8000	FAST! Use		-~ II	e	at www.i	rs.gov/efile	Э.	
b Employer identification number					1	1 Wages, tips, other compensation				2 Federal income tax withheld				
27-3692531						201346.55				41679.92				
c Employer's	name, address, and Z	IP code			3	3 Social security wages				4 Social security tax withheld				
Morton-Green Group						166503.62				12737.53				
4392 Anne Glens Suite 629				5	- manager and apr				6 Medicare tax withheld					
Hillstad OK 91182-9349					208309.19 7 Social security tips				6040.97 8 Allocated tips					
				'	1									
						166503.62 9 Advance EIC payment				208309.19 10 Dependent care benefits				
d Control number					9	Advance	EIC payment		10	Depen		enetits		
2101811										130				
e Employee's first name and initial Last name				11	11 Nonqualified plans				12a See instructions for box 12					
~1	Chad Flores					112				E 6340				
Cn						13 Statutory Retirement Third-party employee plan sick pay					1			
05937 White Ridges Suite 346						employee plan sick pay				H	892			
Murrayborough AR 43285-6721					14	14 Other (see enclosed Notice to Employee)					1			
										E	517			
									12d		1			
											336			
	address and ZIP code		Transis is a	Transition is		1.0.								
	imployer's state ID nu		16 State wages, tips, etc.	17 State income ta	Х	3.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Local income tax		20 Localit	·		
SC	402-76	-254	105717.2	7547.44		149172.99 2		28630	8630.64		Emily	Forge		
LA	221-24	-893	110592.52	11971.4		228150.38 3:		31271.79			Sanders (Crossroad		

Wage and Tax Statement 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.

REISSU	JED a Emp	loyee's social security number		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							
STATEM	ENT	361-49-1960	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Employer identific	ation number	1 \	Vages, tips, other compensation		Federal income tax withheld						
27-3692531					201346.55	41679.92					
c Employer's name, address, and ZIP code					ocial security wages	4 Social security tax withheld					
Morton-Green Group					166503.62	12737.53					
4392 Anne Glens Suite 629 Hillstad OK 91182-9349				5 N	fedicare wages and tips	6 Medicare tax withheld 6040.97					
					208309.19						
				7 8	ocial security tips	8 Allocated tips					
					166503.62	208309.19					
d Control number				9 A	dvance EIC payment	10 Dependent care benefits					
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e Employee's first n	e Employee's first name and initial Last name				lonqualified plans	12a See instructions for box 12					
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Chad Flores				13 Statu empl		12b	1				
05937 White Ridges Suite 346 Murrayborough AR 43285-6721					pyee plan sick pay		Н	892			
					Other (see enclosed Notice to Employ	12c	1				
						E	517				
						ŀ	12d				
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f Employee's address and ZIP code 15 State Employee's state ID number 16 State wages, tips, etc. 17 State income tax					40 1	140			00.1		
		16 State wages, tips, etc.					ocal income ta	x	20 Localit	•	
SC	402-76-25	4 105717.2	7547.44		149172.99		28630.64		Emily	Forge	
LA	221-24-89	3 110592.52	11971.4		228150.38	31	271.79		Sanders	Crossroad	

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

