R	EISSUED	a Employee's socia	•			Sa	ife, Accurate,	IBS •	v Gila	Visit the	IRS Website		
ST	ATEMENT	19	97-98-7861	OMB N	o. 1545-0	008 <b>F</b>	AST! Use	J	≁file >	at www.i	rs.gov/efile.		
b Employer identification number						1 Wages, tips, other compensation				Federal income tax withheld			
62-4761876						226605.48				66025.65			
<b>c</b> Employ	er's name, address, and Z	3 Social security wages				4 Social security tax withheld							
Moreno, Burns and Wilkinson PLC					233224.07				17841.64				
0679 Gill Junctions Apt. 805						5 Medicare wages and tips				6 Medicare tax withheld			
Lake Rachel AL 40976-1406					190953.5				5537.65				
					7 Social security tips				8 Allocated tips				
						233224.07			190953.5				
d Control number					9 Advance EIC payment 10 D			10 Depen	ependent care benefits				
604957									258				
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
					247			D 6277					
1	Daniel Scott					13 Statutory Retirement Third-party employee plan sick pay			12b				
7703 Stokes Forest Suite 381					employee plan Sick pay					370			
Garyland IA 33745-9863						14 Other (see enclosed Notice to Employee)				12c			
									E	E 535			
									12d				
										346			
	ee's address and ZIP cod					1					1		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	3.1, 1, 1, 1, 1			9 Local income tax		20 Locality name			
WV	417-40	-730	110648.42	11581.34		179953.66 3		32	2348.79		Brittany Villages		
sc	041-69	-077	108274.64	8639.16	191430.17		37	37726.82		Brian Lane			

Wage and Tax
Form W-2 Statement

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.

REISSUED a Employee's social security number This info						This information is being furnish	ned to t	the Internal Re	venue Serv	ice. If you are required		
	TATEMENT	19	97-98-786	51	OMB No	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> Emplo	yer identification number				II.	1 V	Vages, tips, other compensation	Federal income tax withheld				
62-4761876						226605.48			66025.65			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Moreno, Burns and Wilkinson PLC					233224.07			17841.64				
0679 Gill Junctions Apt. 805 Lake Rachel AL 40976-1406					5 N	Medicare wages and tips		6 Medicare tax withheld				
						190953.5		5537.65				
					7 Social security tips			8 Allocated tips				
					233224.07			190953.5				
d Control number					9 Advance EIC payment			10 Dependent care benefits				
604957									258			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Daniel Scott					247			D 6277				
	Daniel Scott					13 Statutory Retirement Third-party employee plan sick pay			12b	i		
	7703 Stokes Forest Suite 381 Garyland IA 33745-9863					X X X 14 Other (see enclosed Notice to Employee)				370		
									12c			
									E	535		
								F	12d			
								346				
f Employee's address and ZIP code												
15 State		Employer's state ID number 16 State wages, tips, etc. 17 State income tax		3,.,.,			ocal income tax	20 Locality name				
WV	417-40	-730	110648.4	12	11581.34		179953.66		32348.79		Brittany Villages	
sc	041-69-077 108274.64 8639.16		8639.16	191430.17		377	726.82	Brian Lane				

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

