REISSUED a Employee's social security number		Safe, Accurate,	RSO A SELO	Visit the IRS Website			
STATEMENT 078-09-8487	OMB No. 1545-0	008 FAST! Use	*E tile	at www.irs.gov/efile.			
b Employer identification number	1	Wages, tips, other compensation	2 Federa	al income tax withheld			
61-7678882		185111.41	4204	42046.67			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social	4 Social security tax withheld			
Burns PLC Group		162490.73	1243	12430.54			
2175 Cortez Extension Suite 296	5	Medicare wages and tips	6 Medica				
North Shannonside HI 44479-4725		200624.49	0 48	5818.11			
North bildinging in 1177 1725	7	Social security tips	8 Allocat	8 Allocated tips			
d Control number	9	162490.73 Advance EIC payment	10 Depen	200624.49			
	9	Advance EIC payment	10 Depen				
9824042				247			
e Employee's first name and initial Last name	11	Nonqualified plans	12a See in	structions for box 12			
Shelby Clark		265	H	н 3914			
Shelby Clark	13 Stat	utory Retirement Third-par sloyee plan sick pay	ty <b>12b</b>				
58186 Russell Road				768			
South Danielside OK 71210-8105	14	Other (see enclosed Notice to Empl	oyee) 12c	ı			
			E	239			
			12d	1			
			P	291			
f Employee's address and ZIP code							
The state of the s	te income tax	18 Local wages, tips, etc.	19 Local income ta	x 20 Locality name			
KS 414-68-545 94284.31 419	9.53	129690.79	34876.12	Jennifer Manor			
CA 061-45-009 87554.05 4533	2.3	131479.35	19321.56	Richard Spurs			

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.

	REISSUED	a Employee's socia	•		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							
	<u> </u>	07	78-09-8487	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
<b>b</b> Employ	b Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld			
61-7678882			185111.41				42046.67					
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld				
Burns PLC Group				162490.73				12430.54				
2175 Cortez Extension Suite 296 North Shannonside HI 44479-4725			5 Medicare wages and tips				6 Medicare tax withheld					
			200624.49				5818.11					
NOTER SHARMORSIDE HI 444/9-4/25				7 Social security tips				8 Allocated tips				
				162490.73				200624.49				
d Control number			9 Advance EIC payment				10 Dependent care benefits					
9824042							247					
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12					
Shelby Clark			265 13 Statutory Retirement Third-party				H 3914					
			employee plan sick pay				120	1				
58186 Russell Road								768				
South Danielside OK 71210-8105			14	Other (see enclosed Notice	to Employ	ee)	12c	1				
							E	239				
									12d			
								P	291			
	yee's address and ZIP co			T .		1					,	
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc	i.		cal income t		20 Locality name	
KS	414-68	3-545	94284.31	4199.53		129690.79		348	376.12	) 	Jennifer Manor	
CA	061-45	5-009	87554.05	4532.3		131479.35		193	321.56	;	Richard Spurs	

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

