REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website					
STATEMENT 063-46-1219	OMB No. 1545	-0008 FAST! Use	at www.irs.gov/efile.				
b Employer identification number	1	Wages, tips, other compensation	Federal income tax withheld				
12-3486532		216909.95	25563.28				
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security tax withheld				
Brooks, Blair and Clark Group		237832.56	18194.19				
6537 Davis Isle	5	Medicare wages and tips	6 Medicare tax withheld				
Garyburgh IN 38416-1121		154239.35	4472.94 8 Allocated tips				
Garyburgh IN 38416-1121	7	Social security tips					
		237832.56	154239.35				
d Control number	9	Advance EIC payment	10 Dependent care benefits				
4036507			288				
e Employee's first name and initial Last name	11	Nonqualified plans	12a See instructions for box 12				
		168	н 6498				
George Arias		tatutory Retirement Third-party	12b				
56128 Dana Key Suite 390	e	mployee plan sick pay	D 550				
West Jeffrey DC 53110-2129	14	Other (see enclosed Notice to Employ	ree) 12c				
Nest belief be 33110 2123			872				
			12d				
			G 248				
f Employee's address and ZIP code			3 230				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	17 State income tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name				
OR 929-18-005 100247.44 !	5328.1	174033.92	34806.47 Sullivan Creek				
NV 371-94-128 108382.05	7354.33	248393.44	25397.14 Jones Drive				

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.

F	REISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
_	TATEMENT	0	63-46-1219	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 Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld					
12-3486532				216909.95			25563.28					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Brooks, Blair and Clark Group				237832.56			18194.19					
6537 Davis Isle				5 Medicare wages and tips			6 Medicare tax withheld					
Garyburgh IN 38416-1121				154239.35			4472.94					
				7 Social security tips			8 Allocated tips					
				237832.56			154239.35					
d Control number			9 Advance EIC payment			10 Dependent care benefits						
4036507				288								
e Emplo	e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box 1			for box 12					
			168			н 6498						
George Arias					tatutory Retirement Third-p		12b					
56128 Dana Key Suite 390				employee plan sick pay			D	550				
West Jeffrey DC 53110-2129				14	Other (see enclosed Notice to Em	oloyee)	12c					
							872					
								12d	072			
								120	1			
								G	248			
	yee's address and ZIP code											
15 State	Employer's state ID nur		16 State wages, tips, etc.	17 State income tax	e tax 18 Local wages, tips, etc.			19 Local income tax		20 Locality name		
OR	929-18	-005	100247.44	5328.1		174033.92	34	4806.47		Sullivan Creek		
NV	371-94	-128	108382.05	7354.33		248393.44	25	5397.14		Jones Drive		

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

