REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS We	bsite			
STATEMENT 639-44-1205	OMB No. 1545-0008 FAST! Use at www.irs.gov/e	file.			
b Employer identification number	1 Wages, tips, other compensation 2 Federal income tax withheld	Federal income tax withheld			
90-1636779	226808.76 23849.91	23849.91			
c Employer's name, address, and ZIP code	3 Social security wages 4 Social security tax withheld	4 Social security tax withheld			
Mcneil-Knight LLC	280110.36 21428.44	21428.44			
2025 Blackburn Falls Suite 201	5 Medicare wages and tips 6 Medicare tax withheld				
Lake Stephenbury CO 32451-9141		8032.91			
hake Scephenbury CO 32431 3141		8 Allocated tips			
		276997.03			
d Control number		10 Dependent care benefits			
118800		142			
e Employee's first name and initial Last name	11 Nonqualified plans 12a See instructions for box 1	12a See instructions for box 12			
Room a Comittle	159 2561	2561			
Emma Smith	13 Statutory Retirement Third-party 12b				
23582 Berger Plains Suite 830	employee plan sick pay 484				
Marychester IA 77222-2822	14 Other (see enclosed Notice to Employee) 12c				
Haryones der III //222 2022	494				
	12d				
	D 147				
f Employee's address and ZIP code					
15 State Employer's state ID number 16 State wages, tips, etc. 17 State	come tax 18 Local wages, tips, etc. 19 Local income tax 20 Loc	ality name			
LA 051-26-700 103238.22 1152	.68 168448.95 36501.78 smith	Crossroad			
WY 286-58-280 102958.57 1351	.85 265032.88 28995.16 Mary	Turnpike			

Wage and Tax 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.

REIS	SSUED	a Employee's socia	I security number		This information is being furnished to the Internal Revenue Service. If you are required							
STAT	EMENT	63	39-44-1205	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 V	· ·			2 Federal income tax withheld				
90-1636779				226808.76			23849.91					
c Employer's r	name, address, and	ZIP code			3 Social security wages			4 Social security tax withheld				
Mcneil-Knight LLC				280110.36			21428.44					
2025 Blackburn Falls Suite 201 Lake Stephenbury CO 32451-9141				5 Medicare wages and tips			6 Medicare tax withheld					
				276997.03			8032.91					
				7 Social security tips			8 Allocated tips					
				280110.36			276997.03					
d Control number				9 Advance EIC payment			10 Dependent care benefits					
118800							142					
e Employee's	e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Emma Smith				159 13 Statutory Retirement Third-party employee plan sick pay			2561					
23582 Berger Plains Suite 830				Cimpi	X SIGN PAY			484				
Marychester IA 77222-2822				14 Other (see enclosed Notice to Employee)			12c					
								494				
							12d					
							D	147				
f Employee's	address and ZIP cod	le										
15 State Er	mployer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income tax		20 Locality name		
LA	051-26	5-700	103238.22	11525.68		168448.95	36	501.78		Smith Crossroad		
WY	286-58	3-280	102958.57	13514.85		265032.88	28	995.16		Mary Turnpike		

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

