Wage and Tax Statement						Department of the TreasuryInternal Revenue Service						
DE	784-72		57264.23	3480.6		120781.34		1813	7.79		Xavier Brooks	
MS	275-01	-664	52048.43	3043.25		86735.74		1817	7.9		Mercer Center	
15 State	Employer's state ID nur		16 State wages, tips, etc.	17 State income to	ax	18 Local wages, tips,			income ta	x	20 Locality name	
	ee's address and ZIP code			T -			1					
								12	d D	124		
									D	972		
East Carla OR 81693-6354					14 C	ther (see enclosed Not	ice to Employe	ee) 12	C	1		
0324 Schneider Villages					emplo	yee plan	sick pay		G	304		
Gregory Hernandez				13 Statu	ory Retirement	Third-party	12		13900			
2 Employee of Medical Manual Education					117				E 3966			
1584847 e Employee's first name and initial Last name						11 Nonqualified plans 12a See instructions for box 1					for box 12	
d Control number					9 A	dvance EIC payment		10	⊔epen	129	eneiits	
1.0 and a star					0 0	83100.49			97874.1 10 Dependent care benefits			
West Amber GA 59859-8271					7 S	97874.1 7 Social security tips			2838.35 8 Allocated tips			
241 Gregory Cliffs Suite 332					5 N				6 Medicare tax withheld			
Liu, Price and Brown PLC						83100.49			6357.19			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
12-7470713						107235.53			27218.07			
b Employer identification number					1 V	1 Wages, tips, other compensation			Federal income tax withheld			
	ATEMENT	36	68-18-4791	ОМВ	No. 1545-00	08 FAST! Us	se Tre	e	<i>ile</i>	at www.i	rs.gov/efile.	
RE	EISSUED	a Employee's socia	al security number			Safe, Acc	urate,		77	Visit the	IRS Website	

Statement Form W-2 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 sec	curity number		This information is being furnished to the Internal Revenue Service. If you a						
STATEMENT 368-	OMB No	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be this income is taxable and you fail to report it.						u if	
b Employer identification number		•	1 \	Wages, tips, other compensation		2 Federal	income tax	withheld	
12-7470713	107235.53			27218.07					
c Employer's name, address, and ZIP code	3 Social security wages			4 Social security tax withheld					
Liu, Price and Brown P	83100.49			6357.19					
241 Gregory Cliffs Sui	5 1	Medicare wages and tips		6 Medicare tax withheld					
West Amber GA 5985	_	97874.1			2838.35				
West Ambel GA 5905		7 Social security tips			8 Allocated tips				
	83100.49			97874.1					
d Control number	9 Advance EIC payment			10 Dependent care benefits					
1584847						129			
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12				
		117			E 3966				
Gregory Hernande	-	13 Statu		y ·	12b	1			
0324 Schneider Villa		emp	loyee plan sick pay		G	304			
East Carla OR 81	.693-6354		14 (Other (see enclosed Notice to Empl	oyee)	12c	I		
						D	972		
						12d			
						D	124		
f Employee's address and ZIP code							l		
15 State Employer's state ID number 16	State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Loc	cal income tax		20 Locality nar	me
MS 275-01-664 52	2048.43	3043.25		86735.74	181	77.9		Mercer Ce	nter
DE 784-72-826 5	7264.23	3480.6		120781.34	181	.37.79		Xavier Bro	ooks

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

