REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website				
STATEMENT 894-07-1311	OMB No. 1545-	0008 FAST! Use	E tile	at www.irs.gov/efile.		
b Employer identification number	1	Wages, tips, other compensation	2 Federa	Federal income tax withheld		
38-9763972		229530.86	5501	55010.21		
c Employer's name, address, and ZIP code	3	Social security wages	4 Social	4 Social security tax withheld		
Jimenez PLC Ltd		194807.46		14902.77		
358 Samantha Trail	5	Medicare wages and tips	6 Medica			
East Jameschester OH 04053-7394		282067.61		8179.96		
East Jameschester OH 04053-7394	7	Social security tips	8 Allocat	8 Allocated tips		
		194807.46		282067.61		
d Control number	9	Advance EIC payment	10 Depen	10 Dependent care benefits		
8611686				285		
e Employee's first name and initial Last name	11	Nonqualified plans	12a See in	12a See instructions for box 12		
* · · · · · · · · · · · · · · · · · · ·		142	н	н 7354		
Luis Warren	13 St	atutory Retirement Third-party	12b			
722 Smith Throughway		(Sick pay	G	G 207		
Kimberlytown AZ 33509-2645	14	Other (see enclosed Notice to Employ	/ee) 12c	<u>'</u>		
1111112C114 COWN 1111			E	395		
			12d			
				F F 4		
				554		
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17	State income tax	18 Local wages, tips, etc.	19 Local income ta	x 20 Locality name		
	0085.47	169307.1	37932.62			
NI	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		37932.02	Secii manor		
MA 597-00-841 120935.02 75	28.69	203954.49	33735.03	Cline Well		

Wage and Tax

Form W-2 Statement

5010

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.

RE	EISSUED	a Employee's soci	•		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							
	ATEMENT	89	94-07-1311	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Employe	er identification number				1 \	Vages, tips, other compensation	Federal income tax withheld					
38-9763972				229530.86			55010.21					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Jimenez PLC Ltd				194807.46			14902.77					
358 Samantha Trail East Jameschester OH 04053-7394			5 Medicare wages and tips			6 Medicare tax withheld						
			282067.61			8179.96						
			7 Social security tips			8 Allocated tips						
			194807.46			282067.61						
d Control number			9 Advance EIC payment			10 Dependent care benefits						
8611686						285						
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12						
Luis Warren			142			н 7354						
			13 Statutory Retirement Third-party			12b						
722 Smith Throughway			employee plan sick pay			G 207						
Kimberlytown AZ 33509-2645			14 (Other (see enclosed Notice to Employ	ree)	12c						
						E	395					
				-	12d	333						
								124	l			
					-		554					
f Employe 15 State	e's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	10.1	ocal income ta		20 Locality name		
			= ' ' '			1				1		
RI	635-11	-т / б	121336.56	10085.47		169307.1	37	932.62		Seth Manor		
MA	597-00	-841	120935.02	7528.69		203954.49	33	735.03		Cline Well		

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

