F	REISSUED	a Employee's socia	•				Safe, Accu	irate,	e 🖸	J. H		Visit the	IRS Websi	te
S	TATEMENT	30	7-61-8206	OMB N	o. 1545-	8000	FAST! Us	e	G		4	at www.i	rs.gov/efile	-
b Employer identification number					1	1 Wages, tips, other compensation				Federal income tax withheld				
43-4869159						83969.77				29689.49				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Martinez LLC Group					90972.22					6959.37				
99356 Strickland Roads East Anthonyfort IN 00689-2559					5 Medicare wages and tips					6 Medicare tax withheld				
					68486.1					1986.1				
					7 Social security tips					8 Allocated tips				
					90972.22					68486.1				
d Control number					9	Advance E	EIC payment			10	Depend	dent care be	enefits	
6226714										170				
e Employee's first name and initial Last name					11 Nonqualified plans					12a See instructions for box 12				
John Lara 4682 Jodi Forest Apt. 975 Stephenville IL 86013-2680					175					н 4486				
					13 Statutory Retirement Third-party sick pay X X X 14 Other (see enclosed Notice to Employee)					12b		ı		
										948				
									/ee)	12c		I		
											D	449		
									12d					
											н	567		
f Emplo	yee's address and ZIP cod	е									1	•		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax			al wages, tips, e	tc.		ocal inco			20 Locality	name
TN	803-38	-510	41192.49	3182.7		795	31.93		15	066	.09		Murray	Pine
MI	504-68	-789	40089.57	4074.26		916	04.52		12	444.	. 92		Julie	Drive

Wage and Tax

Form W-2 **Statement**Copy B--To Be Filed with Employee's FEDERAL Tax Return

5010

Department of the Treasury--Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

F	REISSUED	a Employee's soc	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	3	07-61-8206	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						Wages, tips, other compensation		2 Federal income tax withheld			
43-4869159						83969.77		29689.49			
c Employer's name, address, and ZIP code						Social security wages		4 Social security tax withheld			
Martinez LLC Group 99356 Strickland Roads						90972.22		6959.37			
					5	Medicare wages and tips		6 Medicare tax withheld 1986.1			
						68486.1					
East Anthonyfort IN 00689-2559						Social security tips		8 Allocated tips			
						90972.22		68486.1			
d Control number						Advance EIC payment		10 Dependent care benefits			
6226714								170			
e Emplo	e Employee's first name and initial Last name					Nonqualified plans		12a See instructions for box 12			
	John Lara					175		н 4486			
						utory Retirement Third-party		12b	1		
4682 Jodi Forest Apt. 975						loyee plan sick pay			948		
Stephenville IL 86013-2680					14	Other (see enclosed Notice to Employe	ee)	12c			
								Б	449		
							F	12d	1		
						. E67					
							-	н 567			
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 tax 20 Locality n			
TN	803-38		41192.49	3182.7		79531.93	15	066.0	۱۵	,	
)-210		3102.7		19331.93	13	000.0	<i>,</i> 2	Murray Pine	
MI	504-68	3-789	40089.57	4074.26		91604.52	12	444.9	92	Julie 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

