REISSUED a Employee's social security number		Safe, Accurate,	Visit the IRS Website			
STATEMENT 755-21-3377	OMB No. 1545-0	008 FAST! Use	at www.irs.gov/efile.			
b Employer identification number	1	Wages, tips, other compensation	Federal income tax withheld			
47-8785597		191358.23	66745.91			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security tax withheld			
Molina Ltd Group		190862.58	14600.99			
03489 Heather Expressway	5	Medicare wages and tips	6 Medicare tax withheld			
Fergusonshire MI 44308-7664		213855.87	6201.82			
reigusonsmile mi 44506-7664	7	Social security tips	8 Allocated tips			
		190862.58	213855.87			
d Control number	9	Advance EIC payment	10 Dependent care benefits			
7784963			241			
e Employee's first name and initial Last name	11	Nonqualified plans	12a See instructions for box 12			
		233	4193			
Kevin Reilly	13 Stat		12b			
643 Watts Throughway	emp	loyee plan sick pay	E 112			
Zacharyberg TX 83655-9228	14	Other (see enclosed Notice to Employ	yee) 12c			
Lacharyberg in 05055 5220			н 804			
			12d			
			622			
			633			
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State	ite income tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name			
	4.89	149844.26				
NO 293-40-750 100146.62 613	4.03	149044.20	23438.11 Smith Corner			
DE 299-61-779 103176.09 884	6.71	219037.03	37307.1 Luna Forge			

Wage and Tax 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.

The morning coming running to the morning records

Cut here. Keep lower portion for your records.

RE	EISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required								
STA	ATEMENT	75	55-21-3377	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 Employe	er identification number	•		•	Wages, tips, other compensation			2 Federal income tax withheld					
47-8785597				191358.23			66745.91						
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld						
Molina Ltd Group				190862.58			14600.99						
03489 Heather Expressway				5 Medicare wages and tips			6 Medicare tax withheld						
Fergusonshire MI 44308-7664					213855.87			6201.82					
					7 Social security tips			8 Allocated tips					
					190862.58			213855.87					
d Control number				9 Advance EIC payment			10 Dependent care benefits						
7784963				241									
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box 12										
Kevin Reilly				233 13 Statutory Retirement Third-party			4193						
643 Watts Throughway				emple	x			112					
Zacharyberg TX 83655-9228					14 0	other (see enclosed Notice to Employ	ee)	12c	i				
						н 804							
							-	12d					
							633						
1	e's address and ZIP cod		Transition in the second	Transition in									
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal income tax		20 Localit	-		
NJ	293-48	3-756	100146.62	6134.89		149844.26	234	438.11		Smith	Corner		
DE	299-61	779	103176.09	8846.71		219037.03	373	307.1		Luna	Forge		

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

