REISSUED	a Employee's socia	al security number			Safe, A	ccurate,	O della	Visit the	IRS Website	
STATEMENT	27	75-50-8196	OMB N	lo. 1545-00	008 FAST!	Use	e ~file	at www.i	rs.gov/efile.	
b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld		
46-9100181					46557.75			13923.81		
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld		
Diaz, Stout and Martin Inc					36459.84			2789.18		
423 Melanie Islands Suite 462					5 Medicare wages and tips			6 Medicare tax withheld		
Joelside PA 43261-5685				7 9	38957.01			1129.75		
JOEISIGE PA 45201-5005					Social security tips		8 Alloc	8 Allocated tips		
					36459.84			38957.01		
d Control number				9 Advance EIC payment			10 Depe	10 Dependent care benefits		
8075686								219		
e Employee's first name and initial Last name				11 Nonqualified plans			12a See	12a See instructions for box 12		
				239			н	н 1099		
Veronica	Marti	.nez		13 Statu		Third-party	12b	1		
17157 Hov	ward Stree	et		empl X	T	x sick pay		612		
Port Sand	iraland	IA 37839-	-4199	14 (Other (see enclosed N	lotice to Employe	ee) 12c	i		
TOTO Dane		211 37033	1133					395		
							12d			
							G	893		
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, tip	s, etc.	19 Local income	ax	20 Locality name	
UT 092-	L6-317	25557.08	1059.68		46039.23		5216.41		Young Estates	
MI 417-9	93-593	23774.27	1256.56		57737.26		4980.85		Cynthia Meadow	

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.

REISSUED	a Employee's socia	security number			This information is being furn					
STATEMENT	27	5-50-8196	OMB N	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on you this income is taxable and you fail to report it.						
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
46-9100181				46557.75			13923.81			
c Employer's name, address, and ZIP code				3 3	Social security wages		4 Social security tax withheld			
Diaz, Stout and Martin Inc				36459.84			2789.18			
423 Melanie Islands Suite 462				5 Medicare wages and tips			6 Medicare tax withheld			
Joelside PA 43261-5685				38957.01 7 Social security tips			1129.75 8 Allocated tips			
				36459.84			38957.01			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
8075686								219		
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Veronica Martinez				239 13 Statutory Retirement Third-party			H 1099			
17157 Howard Street Port Sandraland IA 37839-4199				mployee plan sick pay X X 14 Other (see enclosed Notice to Employee)			612			
							12c			
							395			
							G	893		
f Employee's address and ZIP of		140 00000000000000000000000000000000000	147 0000 0000		140 Landana Carata	140			100 1	
5 State Employer's state ID UT 092-1	number L6-317	16 State wages, tips, etc. 25557.08	17 State income tax 1059.68		, , , , , , , , , , , , , , , , , , ,		Local income tax		20 Locality name	
01 092-1	10-21/	23337.08	1039.00		40039.23	32	10.41		Young Estate:	
MI 417-9	93-593	23774.27	1256.56		57737.26	49	80.85		Cynthia Meado	

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

