RI	EISSUED	a Employee's social	•			Safe, Ac	Safe, Accurate,  Visit the IRS Website at www.irs.gov/efile						
ST	ATEMENT	72	0-59-7703	OMB	No. 1545-00	008 FAST! U	Jse 💮		at www.i	rs.gov/efile.			
<b>b</b> Employer identification number						1 Wages, tips, other compensation			Federal income tax withheld				
57-8103914						145599.4			50764.02				
<b>c</b> Employe	er's name, address, and 2	ZIP code			3 8	Social security wages		4 Socia	4 Social security tax withheld				
Hernandez LLC PLC						172097.86	5	1310	13165.49				
4861 Tina Corners New John DC 83876-9668					5 N	Medicare wages and tip	6 Medio						
						119385.1		3462.17					
					7 5	Social security tips	8 Alloca	8 Allocated tips					
						172097.86		119385.15					
d Control number						dvance EIC payment	10 Depe	10 Dependent care benefits					
2	2632954						295						
e Employee's first name and initial Last name					11 N	11 Nonqualified plans			12a See instructions for box 12				
						139			P 6071				
Michael Alexander						tory Retirement	12b						
52216 Anderson Springs						employee plan sick pay			348				
Villegasborough WI 52205-520						14 Other (see enclosed Notice to Employee)			i				
VIIIcgussolougii WI S2203 S20									124				
									12d				
									519				
f Employee's address and ZIP code									319				
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income ta	ıx	18 Local wages, tips	s, etc. 1	9 Local income t	эх	20 Locality	name		
OK	871-15	-895	69067.55	2812.23		158657.83	3 2	28699.81		David	Keys		
WI	553-96	-453	76658.1	3844.2		130735.64	1 2	28822.65	, )	Walter	Land		

Wage and Tax Statement 5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement
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.

REIS	SSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required									
STAT	TEMENT	72	20-59-7703	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.								n you if	
b Employer identification number						1 Wages, tips, other compensation				2 Federal income tax withheld				
57-8103914						145599.4				50764.02				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Hernandez LLC PLC						172097.86				13165.49				
4861 Tina Corners						5 Medicare wages and tips				6 Medicare tax withheld				
						119385.15				3462.17				
New John DC 83876-9668					7 Social security tips					8 Allocated tips				
					172097.86					119385.15				
d Control number					9 Advance EIC payment					10 Dependent care benefits				
2632954											295			
e Employee's first name and initial Last name					11 Nonqualified plans					12a See instructions for box 12				
Michael Alexander						139				P 6071				
						13 Statutory Retirement Third-party					12b			
52216 Anderson Springs					employee plan sick pay					348				
						) )+ /		tion to Female:		12c	340			
Villegasborough WI 52205-520					14 Other (see enclosed Notice to Employee)				/ee)	120				
				124										
										12d	1			
								519						
f Employee's address and ZIP code									-		1			
15 State E	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19		19 L	9 Local income tax		20 Locality	name		
OK	871-15	5-895	69067.55	2812.23		158657.83 2		28	28699.81		David	Keys		
WI	553-96	5-453	76658.1	3844.2	130735.64 28		28	822.65	Walter	Land				

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

