REISSUED a Employee's social security number		Safe, Accurate,	Visit the II	RS Website		
STATEMENT 635-41-1739	OMB No. 1545-0	008 FAST! Use	at www.irs	s.gov/efile.		
b Employer identification number	1	Wages, tips, other compensation	2 Federal income tax	withheld		
23-9991611		100242.8	21594.45	21594.45		
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security tax w	4 Social security tax withheld		
Martin Ltd LLC		122535.11	9373.94	9373.94		
64225 Guerra Bridge Suite 331	5	Medicare wages and tips	6 Medicare tax withhe			
Derekberg AL 38761-2503		113215.27		3283.24		
Delemberg Am 30701 2303	7	Social security tips	· ·	8 Allocated tips		
		122535.11		113215.27		
d Control number	9	9 Advance EIC payment 10 Dependent care benefits				
6547443			286	286		
e Employee's first name and initial Last name		Nonqualified plans	12a See instructions for	12a See instructions for box 12		
,,		265	8977	8977		
Jonathan Clark	13 State	itory Retirement Third-party oyee plan sick pay	12b			
59112 Johnson Skyway Suite 963	епр	X	P 300	P 300		
Port Victoriaview MO 74318-0887	14	Other (see enclosed Notice to Employ	ee) 12c			
			D 502			
			12d			
			798			
f Employee's address and ZIP code			1			
15 StateEmployer's state ID number16 State wages, tips, etc.17 State	te income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
AL 585-56-873 45311.27 598	3.02	78078.5	15191.64	Taylor Meadows		
UT 501-49-684 49600.64 427	8.01	105308.67	11435.19	Carroll Parkway		

Wage and Tax Statement

Form W-2

5070

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.

E	REISSUED	a Employee's soc	ial security number		This information is being furnished to the Internal Revenue Service. If you are required						
	TATEMENT		35-41-1739	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.						
	yer identification number			J.	1	Wages, tips, other compensation	iaii to i	2 Federal income tax withheld			
23-9991611				100242.8			21594.45				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Martin Ltd LLC				122535.11			9373.94				
64225 Guerra Bridge Suite 331 Derekberg AL 38761-2503			5 Medicare wages and tips			6 Medicare tax withheld					
			113215.27			3283.24					
			7 Social security tips			8 Allocated tips					
				122535.11			113215.27				
d Control number			9	9 Advance EIC payment			10 Dependent care benefits				
6547443						286					
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12						
Jonathan Clark			265			8977					
	Jonathan Clark			13 State	utory Retirement Third-party loyee plan sick pay		12b	1			
59112 Johnson Skyway Suite 963			omp			E	300				
Port Victoriaview MO 74318-0887			14	Other (see enclosed Notice to Employ	ee)	12c	ı				
						Г	502				
							F	12d			
						798					
	yee's address and ZIP cod									•	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		ocal incom		20 Locality name	
AL	585-56	5-873	45311.27	5983.02		78078.5 1		L5191.64		Taylor Meadows	
UT	501-49	9-684	49600.64	4278.01		105308.67	11	435.1	L9	Carroll Parkway	

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

