Employee Reference Copy Wage and Tax Statement Copy C for employee's records Dept.

Corp. d Control number **Employer use only** 120347 PHOE/MOD C-9060 Employer's name, address, and ZIP code

**MERITAGE HOMES** CORPORATION 8800 E RAINTREE DR SCOTTSDALE AZ 85260

Batch #01233

e/f Employee's name, address, and ZIP code LAXMI SARASWATHI BOYILLA 17030 N 49TH STREET APT 1038, BUILDING #10 SCOTTSDALE AZ 85254 b Employer's FED ID number a Employee's SSA number XXX-XX-5049 86-0611231 Wages, tips, other comp. 2 Federal income tax withheld 22198.13 1090,10 Social security wages 4 Social security tax withheld 23125.61 1433.79 6 Medicare tax withheld Medicare wages and tips 23125.61 335.32 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for hoy 12 927.48 14 Other 13 Stat emp. Ret. plan 3rd party sick pa 15 State Employer's state ID no. 16 State wages, tips, etc. AZ 86-0611231 22198.13

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	AZ. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	23, 187.41	23, 187, 41	23, 187, 41	23, 187.41
Less 401(k) (D-Box 12)	927.48	N/A	N/A	927.48
Less Other Cafe 125	61.80	61.80	61.80	61.80
Reported W-2 Wages	22,198.13	23,125.61	23,125.61	22,198.13

2. Employee Name and Address.

LAXMI SARASWATHI BOYILLA 17030 N 49TH STREET **APT 1038, BUILDING #10** SCOTTSDALE AZ 85254

1	Wages, tips, other of 221	omp. 98.13	2 Feder	al income	tax withheld 1090.10
3	Social security wag 231	4 Socia	security	tax withheld 1433.79	
5	Medicare wages and tips 23125.61		6 Medic	are tax wi	thheld 335.32
d	Control number	Dept.	Corp.	Emplo	yer use only
12	20347 PHOE/MOD	C-9060		T	44

20 Locality name

Employer's name, address, and ZIP code **MERITAGE HOMES** 

17 State income tax

19 Local income tax

CORPORATION 8800 E RAINTREE DR SCOTTSDALE AZ 85260

599.34

b	Employer's FED ID number 86-0611231	a Employee's SSA number XXX-XX-5049
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12 D <sub>1</sub> 927.48
14	Other	12b
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pay
e/i	Employee's name, address a	nd ZIP code

LAXMI SARASWATHI BOYILLA

17030 N 49TH STREET APT 1038, BUILDING #10 SCOTTSDALE AZ 85254

15 State	Employer's state ID no.	16 State wages, tips, etc. 22198.13
AZ	86-0611231	22198.13
17 State	income tax	18 Local wages, tips, etc.
	599.34	
19 Local	income tax	20 Locality name

Fe	deral F	iling Co	ру	
W-2	Wage a	and Tax	20	21
AA S	State	ment	ZU	1545-0008
Copy B to be filed with	employee's F	ederal Income T	ax Return.	1040-0008

'	22198.13		Z redeia	ii income i	1090.10
3	3 Social security wages 23125.61		4 Social security tax withheld 1433.79		ax withheld 1433.79
5	5 Medicare wages and tips 23125.61		6 Medica	are tax wit	hheld 335.32
d	Control number	Corp.	p. Employer use only		
12	120347 PHOE/MOD C-9060			T	44
c	c Employer's name, address, and ZIP code				
MERITAGE HOMES					
CORPORATION					
	8800 E RAINTREE DR				
	SCOTTSDALE AZ 85260				

b	Employer's FED ID number 86-0611231	a Employee's SSA number XXX-XX-5049			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a D   927.48			
14	Other	12b			
		12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pa			
e/f	Employee's name, address a	nd ZIP code			

LAXMI SARASWATHI BOYILLA 17030 N 49TH STREET **APT 1038, BUILDING #10** SCOTTSDALE AZ 85254

	State Employer's state ID no. Z 86-0611231	16 State wages, tips, etc. 22198.13
17	State income tax	18 Local wages, tips, etc.
	599.34	
10	Local income tay	20 Locality name

AZ.State Reference Copy Wage and Tax Z Statement Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other c	omp. 98.13	2 Federa	l income t	ax withheld 1090.10
3 Social security wages 23125.61		4 Social	security to	ax withheld 1433.79	
5	Medicare wages and 2312	d tips 25.61	6 Medica	are tax wit	hheld 335.32
đ	Control number	Dept.	Согр.	Emplo	yer use only
12	20347 PHOE/MOD	C-9060		T	44
С	Employer's name, a	ddress, a	nd ZIP cod	е	
	MERITAGI CORPORA 8800 E R SCOTTSD	ATION AINTR	EE DR	<b>60</b> .	

b	Employer's FED ID number 86-0611231	a E	mploy X	ee's SS/ XX-X	4 number X - 5049
7	Social security tips	8 4	Allocate	ed tips	
9		10 D	epende	ent care	benefits
11	Nonqualified plans	12a	Dı		927.48
14	Other	12b	1		
		12c			
		12d			
		13 S	stat emp.	Ret. plan	3rd party sick pa
~/ <del>6</del>	Employee's name address as	d 711	D code		

e/f Employee's name, address and ZIP cod

LAXMI SARASWATHI BOYILLA 17030 N 49TH STREET **APT 1038, BUILDING #10** SCOTTSDALE AZ 85254

	State Z	Employer's state ID no. 86-0611231	16	State wages, tips, etc. 22198.13
17	State	income tax	18	Local wages, tips, etc.
		599,34		
19	Local	income tax	20	Locality name

AZ.State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.