REISSUED a Er	mployee's social security number		Safe, Accurate, Visit the IRS Website					RS Website		
STATEMENT	028-78-9399	OMB No	o. 1545-00	08 FAST! Use			e	at www.ir	s.gov/efile.	
b Employer identification number			1 W	ages, tips, other compen	sation	2	Federal	income tax	withheld	
54-4246003			86825.31			23375.54				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Shaw-Smith LLC			93374.99			7143.19				
75282 Brenda Island			5 Medicare wages and tips			6 Medicare tax withheld				
Christopherside NE 42517-4291			85355.87				2475.32			
			7 Social security tips			8 Allocated tips				
				93374.99			85355.87			
d Control number			9 Advance EIC payment			10 Dependent care benefits				
8259445							270			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Danielle Leonard			210			E 4835				
			13 Statutory Retirement Third-party employee plan sick pay			12b				
6185 Sarah Mills Apt. 857			empio	yee plan	sick pay		E	638		
_			14 O	ther (see enclosed Notice	to Employee)	12c				
Rossberg OK 88466-8499							н	330		
						12d	12d			
						124	1			
							H	913		
f Employee's address and ZIP code 15 State Employer's state ID number	AC Chata warner time att	17 State income tax		40	- 140	Local inc		1	20. Landituana	
	16 State wages, tips, etc.			18 Local wages, tips, etc					20 Locality name	
TX 260-81-4	23 41184.98	2963.69		71924.41	<u></u>	3594	. TZ		Amber Prairie	
PA 407-58-6	34 42544.78	2570.81		85316.32	1	1893	. 47		Miller Rapid	

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.

RE	EISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
STA	ATEMENT	02	28-78-9399	OMB No	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 Employer identification number				Wages, tips, other compensation			2 Federal income tax withheld				
54-4246003				86825.31			23375.54				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Shaw-Smith LLC				93374.99			7143.19				
75282 Brenda Island					5 Medicare wages and tips			6 Medicare tax withheld			
Christopherside NE 42517-4291						85355.87		2475.32			
					7 Social security tips			8 Allocated tips			
						93374.99		85355.87			
d Control number				9 Advance EIC payment			10 Dependent care benefits				
8259445							270				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
				210			E 4835				
Danielle Leonard			13 Statutory Retirement Third-party			12b					
6185 Sarah Mills Apt. 857				emp	oloyee plan sick pay		E	638			
0105 Saran MIIIS Apt. 057			Ļ_				030				
Rossberg OK 88466-8499				14	Other (see enclosed Notice to Employ	ee)	12c	ĺ			
							H	330			
								12d	1		
								н	913		
f Employe	e's address and ZIP cod	le					-		10-0		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Lo	ocal income ta	ax	20 Locality name	
TX	260-81	423	41184.98	2963.69		71924.41	13	594.12		Amber Prairie	
PA	407-58	3-634	42544.78	2570.81		85316.32	118	893.47		Miller Rapid	

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

