F	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website							IRS Website			
S	TATEMENT	12	27-50-1048	OMB	No. 1545-0	8000	FAST! Us	se 🍟	E TI	le)	at www.i	rs.gov/efile.			
b Employer identification number					1 Wages, tips, other compensation				2	Federa	l income ta	x withheld			
	59-1939953					158746.72				56212.09					
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld					
Shah LLC and Sons						138448.21				10591.29					
7172 Elizabeth Square Apt. 832					5					6 Medicare tax withheld					
New Robert TN 58778-0355						202932.4					5885.04				
New Robert IN 30770-0333					7	7 Social security tips				8 Allocated tips					
							138448.21				202932.4				
d Control number					9	Advance E	IC payment		10	Depen	dent care b	enefits			
6090878										295					
e Employee's first name and initial Last name					11	11 Nonqualified plans				12a See instructions for box 12					
Sarah Walton					259					2235					
					13 Statutory Retirement Third-party employee plan sick pay				12b	12b					
2810 Evans Run Apt. 414						X Stock play				н 506					
Staceyborough NM 83069-3787					14	14 Other (see enclosed Notice to Employee)				12c					
										644					
									12d	12d					
									н	394					
f Employee's address and ZIP code															
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Loca	al wages, tips,	etc.	19 Local in	come tax		20 Locality name			
VT	772-30	-053	80650.16	2608.98		181867.92		22161.98			Joseph Brook				
TN	020-90	-103	71971.59	2533.09		1344	187.55		21741	69		Andrew Passage			
,	320 30		1 : = 2 : = : 3 2									-march rassage			

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.

R	EISSUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required										
ST	STATEMENT 127-50-1048 OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on this income is taxable and you fail to report it.							ı you ii							
b Employer identification number				1 V	1 Wages, tips, other compensation				2 Federal income tax withheld						
59-1939953						158746.72				56212.09					
c Employe	er's name, address, and 2	3 8	3 Social security wages				4 Social security tax withheld								
Shah LLC and Sons						138448.21				10591.29					
7172 Elizabeth Square Apt. 832						5 Medicare wages and tips				6 Medicare tax withheld					
						202932.4				5885.04					
r	New Robert TN 58778-0355						7 Social security tips				8 Allocated tips				
			138448.21				202932.4								
d Control number						9 Advance EIC payment 10 Dependent ca					dent care be	enefits			
6090878											295				
e Employee's first name and initial Last name					11 N	11 Nonqualified plans				12a See instructions for box 12					
Sarah Walton						259				2235					
2	Sarah Wa	13 Statutory Retirement Third-party				12b									
2810 Evans Run Apt. 414 Staceyborough NM 83069-3787						mployee plan sick pay 14 Other (see enclosed Notice to Employee)				н 506					
										12c					
										644					
										12d					
										н	394				
f Employee's address and ZIP code										11 334					
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income ta	x	18 Local wages,	tips, etc.	19 L	ocal inco	me tax	:	20 Locality	/ name		
VT	772-30		80650.16	2608.98		181867.	•	22	161.	98		Joseph			
-								+==				OP			
TN	020-90	-103	71971.59	2533.09		134487.	55	21	741.	69		Andrew	Passage		

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

