REISSU	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Website								
STATEM	NT 7	34-14-9641	OMB N	o. 1545-00	008 FAST! U	se	$G^{\prime\prime}I$	le)	at www.i	rs.gov/efile.		
b Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld				
38-9520842				165517.94			2	24088.77				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Shepherd Inc Inc				123289.28				9431.63				
710 Edward Run				5 Medicare wages and tips				6 Medicare tax withheld				
East Sandraview NE 25308-3679				207347.14				6013.07				
East Sandraview NE 25308-3679					7 Social security tips				8 Allocated tips			
				123289.28				207347.14				
d Control number				9 Advance EIC payment			10					
7088889								239				
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12				
				197				G 6368				
Mr. Dale				13 Statutory Retirement Third-party			12b					
127 Cook Estates Suite 209				employee plan sick pay				D 847				
Dunnland GA 61657-7480				14 Other (see enclosed Notice to Employee)			ee) 12c		i			
									647			
			12d				12d					
								G	197			
f Employee's addres	s and ZIP code											
15 State Employe	r's state ID number	16 State wages, tips, etc.	17 State income tax	='	18 Local wages, tips	, etc.	19 Local in	come tax		20 Locality name		
HI	782-07-341	74903.55	2976.14		127709.94		18770	.81		Phillips Stream		
ні	354-83-606	80196.23	3323.54		196190.69	)	25664	.09		Nicole Stream		

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.

R	EISSUED	a Employee's social	l security number								
ST	ATEMENT	73	4-14-9641	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				
38-9520842				165517.94			24088.77				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Shepherd Inc Inc				123289.28			9431.63				
710 Edward Run East Sandraview NE 25308-3679				5 Medicare wages and tips			6 Medicare tax withheld				
				207347.14			6013.07				
				7 Social security tips			8 Allocated tips				
				123289.28			207347.14				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
7088889							239				
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Mr. Dale				197  13 Statutory Retirement Third-party employee plan sick pay			G 6368				
127 Cook Estates Suite 209				<b>X</b>			D 847				
Dunnland GA 61657-7480				14 Other (see enclosed Notice to Employee)			12c 647				
											G
f Employee's address and ZIP code						-		,			
15 State	Employer's state ID number 16 State wages, tips, etc. 17 State income tax		18 Local wages, tips, etc. 19		19 L	Local income tax		20 Locality name			
HI	782-07	-341	74903.55	2976.14		127709.94	18	770.81		Phillips Stream	
				<u> </u>		<b></b>	<b> </b>			<b>†</b>	
HI	354-83	8-606	80196.23	3323.54		196190.69	25	664.09		Nicole Stream	

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

