REISSUED a	Employee's social security number			Safe, Accurat	e,	A STILL	Visit the IRS Website			
STATEMENT	501-99-6907	OMB N	o. 1545-00	008 FAST! Use		≁file	at www.irs.gov/efile.			
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
77-9803299				162257.18			23274.95			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Shepard Inc PLC				129360.58			9896.08			
53011 Cummings Crescent				5 Medicare wages and tips			6 Medicare tax withheld			
Allenfort VT 82355-3845			121784.47			3531.75				
ATTENIOTE VI 02303-3040			7 Social security tips			8 Allocated tips				
				129360.58			121784.47			
d Control number			9 A	dvance EIC payment		10 Depend	dent care benefits			
428642							155			
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box 12			structions for box 12				
			278			н 3761				
Morgan Shaw			13 Statutory Retirement Third-party employee plan sick pay			12b	1			
2495 Crystal Brook			empi		X	P	917			
Williston MD 41531-8951				14 Other (see enclosed Notice to Employee)			1			
WIIIISCON FID 41551 0951							110			
						12d				
						_	1.00			
						P	166			
f Employee's address and ZIP code 15 State Employer's state ID number	er 16 State wages, tips, etc.	17 State income tax	<u> </u>	18 Local wages, tips, etc.	10	Local income tax	x 20 Locality name			
, ,,, , , , , , , , , , , , , , , , , ,	3			ŭ · · ·		9174.21	•			
AR 733-63-7	727 82670.34	5089.1		185540.26)	Eric Forks			
VA 382-84-3	80556.75	4596.59		210666.65		1988.87	Elizabeth Cape			

Wage and Tax

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.

REISSUED a Employee's social security number		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if							
STATEMENT 501-99-69	907 OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Employer identification number			Wages, tips, other compensation			Federal income tax withheld			
77-9803299			162257.18			23274.95			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Shepard Inc PLC			129360.58			9896.08			
53011 Cummings Crescent			5 Medicare wages and tips			6 Medicare tax withheld			
Allenfort VT 82355-3845			121784.47			3531.75			
			7 Social security tips			8 Allocated tips			
		129360.58			121784.47				
d Control number			9 Advance EIC payment			10 Dependent care benefits			
428642						155			
e Employee's first name and initial Last name			11 Nonqualified plans 12a			See instructions for box 12			
			278			н 3761			
Morgan Shaw			y Retirement Third-p		12b				
2495 Crystal Brook	employ	ee plan sick pa	′	P	917				
Williams MD 41531 005	14 Oth	ner (see enclosed Notice to Em	oloyee)	12c					
Williston MD 41531-895					110				
						12d			
					120	I			
					P	166			
f Employee's address and ZIP code	_	1							
15 State Employer's state ID number 16 State wage	* * *		18 Local wages, tips, etc.	1 -	Local income tax		20 Locality name		
AR 733-63-727 82670.	34 5089.1	:	185540.26	29	174.21		Eric Forks		
VA 382-84-320 80556.	75 4596.59	:	210666.65	24	1988.87		Elizabeth Cape		

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

