

a Employee's social security number <div style="text-align: center; font-weight: bold;">017-29-1270</div>		OMB No. 1545-0008		Safe, Accurate, FAST! Use		Visit the IRS Website at www.irs.gov/efile .	
b Employer identification number (EIN) <div style="text-align: center; font-weight: bold;">77-1871112</div>				1 Wages, tips, other compensation <div style="text-align: center; font-weight: bold;">192129.02</div>		2 Federal income tax withheld <div style="text-align: center; font-weight: bold;">52714.96</div>	
c Employer's name, address, and ZIP code <div style="text-align: center; font-weight: bold;"> Ross LLC Group 5859 Catherine Village Suite 244 Port Ashley NV 27027-8081 </div>				3 Social security wages <div style="text-align: center; font-weight: bold;">177600.72</div>		4 Social security tax withheld <div style="text-align: center; font-weight: bold;">13586.46</div>	
				5 Medicare wages and tips <div style="text-align: center; font-weight: bold;">183019.83</div>		6 Medicare tax withheld <div style="text-align: center; font-weight: bold;">5307.58</div>	
				7 Social security tips <div style="text-align: center; font-weight: bold;">177600.72</div>		8 Allocated tips <div style="text-align: center; font-weight: bold;">183019.83</div>	
d Control number <div style="text-align: center; font-weight: bold;">71</div>				9		10 Dependent care benefits <div style="text-align: center; font-weight: bold;">175</div>	
e Employee's first name and initial Last name Suff. <div style="text-align: center; font-weight: bold; margin-top: 10px;"> Christopher Rogers 548 Elizabeth Path Suite 836 New Denisetown MI 20176-7133 </div>				11 Nonqualified plans <div style="text-align: center; font-weight: bold;">247</div>		12a See instructions for box 12 <div style="text-align: center; font-weight: bold;">K 1961</div>	
				13 Statutory employee Retirement plan Third-party sick pay <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> </div>		12b <div style="text-align: center; font-weight: bold;">108</div>	
				14 Other		12c <div style="text-align: center; font-weight: bold;">112</div>	
						12d <div style="text-align: center; font-weight: bold;">302</div>	
f Employee's address and ZIP code				15 State		16 State wages, tips, etc.	
Employer's state ID number <div style="text-align: center; font-weight: bold;">SD 599-06-719</div>		<div style="text-align: center; font-weight: bold;">93676.43</div>		17 State income tax <div style="text-align: center; font-weight: bold;">5142.92</div>		18 Local wages, tips, etc. <div style="text-align: center; font-weight: bold;">219522.35</div>	
<div style="text-align: center; font-weight: bold;">MO 935-72-471</div>		<div style="text-align: center; font-weight: bold;">87633.0</div>		<div style="text-align: center; font-weight: bold;">4998.09</div>		19 Local income tax <div style="text-align: center; font-weight: bold;">32965.5</div>	
				<div style="text-align: center; font-weight: bold;">176687.44</div>		<div style="text-align: center; font-weight: bold;">32529.41</div>	
						20 Locality name <div style="text-align: center; font-weight: bold;">Wood Drive</div>	
						<div style="text-align: center; font-weight: bold;">Mason Crossroad</div>	

**Wage and Tax
Statement**

2019

Department of the Treasury--Internal Revenue Service

Form W-2

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.

a Employee's social security number <div style="text-align: center; font-weight: bold;">017-29-1270</div>		OMB No. 1545-0008		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 this income is taxable and you fail to report it.			
b Employer identification number <div style="text-align: center; font-weight: bold;">77-1871112</div>				1 Wages, tips, other compensation <div style="text-align: center; font-weight: bold;">192129.02</div>		2 Federal income tax withheld <div style="text-align: center; font-weight: bold;">52714.96</div>	
c Employer's name, address, and ZIP code <div style="text-align: center; font-weight: bold;"> Ross LLC Group 5859 Catherine Village Suite 244 Port Ashley NV 27027-8081 </div>				3 Social security wages <div style="text-align: center; font-weight: bold;">177600.72</div>		4 Social security tax withheld <div style="text-align: center; font-weight: bold;">13586.46</div>	
				5 Medicare wages and tips <div style="text-align: center; font-weight: bold;">183019.83</div>		6 Medicare tax withheld <div style="text-align: center; font-weight: bold;">5307.58</div>	
				7 Social security tips <div style="text-align: center; font-weight: bold;">177600.72</div>		8 Allocated tips <div style="text-align: center; font-weight: bold;">183019.83</div>	
d Control number <div style="text-align: center; font-weight: bold;">7162806</div>				9		10 Dependent care benefits <div style="text-align: center; font-weight: bold;">175</div>	
e Employee's first name and initial Last name Suff. <div style="text-align: center; font-weight: bold; margin-top: 10px;"> Christopher Rogers 548 Elizabeth Path Suite 836 New Denisetown MI 20176-7133 </div>				11 Nonqualified plans <div style="text-align: center; font-weight: bold;">247</div>		12a See instructions for box 12 <div style="text-align: center; font-weight: bold;">K 1961</div>	
				13 Statutory employee Retirement plan Third-party sick pay <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> </div>		12b <div style="text-align: center; font-weight: bold;">108</div>	
				14 Other (see enclosed Notice to Employee)		12c <div style="text-align: center; font-weight: bold;">112</div>	
						12d <div style="text-align: center; font-weight: bold;">302</div>	
f Employee's address and ZIP code				15 State		16 State wages, tips, etc.	
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**Wage and Tax
Statement**

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Department of the Treasury--Internal Revenue Service

Form W-2

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on the back of Copy B.)

Safe, accurate,
FAST! Use

