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|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------|--|
| | | a Employee's social security number 091-94-7522 | | Safe, Accurate, FAST! Use  | | Visit the IRS Website at www.irs.gov/efile. | |
| b Employer identification number (EIN) 35-4983362 | | | | 1 Wages, tips, other compensation 102465.87 | | 2 Federal income tax withheld 34918.18 | |
| c Employer's name, address, and ZIP code Becker, Hall and Barker Group 429 David Mountain Lake Scott KS 91070-9352 | | | | 3 Social security wages 126520.72 | | 4 Social security tax withheld 9678.84 | |
| | | | | 5 Medicare wages and tips 105242.82 | | 6 Medicare tax withheld 3052.04 | |
| | | | | 7 Social security tips 126520.72 | | 8 Allocated tips 105242.82 | |
| d Control number 97 | | | | 9 | | 10 Dependent care benefits 279 | |
| e Employee's first name and initial Last name Suff. Cynthia Adams 2255 Vernon Locks Suite 772 East Rebecca UT 06012-8376 | | | | 11 Nonqualified plans 235 | | 12a See instructions for box 12 C o d e M 5801 | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b C o d e 639 | |
| | | | | 14 Other | | 12c C o d e EE 701 | |
| | | | | | | 12d C o d e L 936 | |
| 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 Local income tax | 20 Locality name | |
| FL | 737-03-586 | 47614.09 | 2894.76 | 127877.93 | 15815.91 | Joseph Bridge | |
| WV | 384-69-874 | 53257.89 | 2199.56 | 100831.85 | 12822.89 | Beltran Plaza | |

**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 091-94-7522 | | 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 35-4983362 | | | | 1 Wages, tips, other compensation 102465.87 | | 2 Federal income tax withheld 34918.18 | |
| c Employer's name, address, and ZIP code Becker, Hall and Barker Group 429 David Mountain Lake Scott KS 91070-9352 | | | | 3 Social security wages 126520.72 | | 4 Social security tax withheld 9678.84 | |
| | | | | 5 Medicare wages and tips 105242.82 | | 6 Medicare tax withheld 3052.04 | |
| | | | | 7 Social security tips 126520.72 | | 8 Allocated tips 105242.82 | |
| d Control number 9745464 | | | | 9 | | 10 Dependent care benefits 279 | |
| e Employee's first name and initial Last name Suff. Cynthia Adams 2255 Vernon Locks Suite 772 East Rebecca UT 06012-8376 | | | | 11 Nonqualified plans 235 | | 12a See instructions for box 12 C o d e M 5801 | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b C o d e 639 | |
| | | | | 14 Other (see enclosed Notice to Employee) | | 12c C o d e EE 701 | |
| | | | | | | 12d C o d e L 936 | |
| 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 Local income tax | 20 Locality name | |
| FL | 737-03-586 | 47614.09 | 2894.76 | 127877.93 | 15815.91 | Joseph Bridge | |
| WV | 384-69-874 | 53257.89 | 2199.56 | 100831.85 | 12822.89 | Beltran Plaza | |

**Wage and Tax
Statement**

2019

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

