

a Employee's social security number <div style="text-align: center; font-weight: bold;">633-84-0761</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;">83-4377336</div>				1 Wages, tips, other compensation <div style="text-align: center; font-weight: bold;">162948.5</div>		2 Federal income tax withheld <div style="text-align: center; font-weight: bold;">29776.14</div>					
c Employer's name, address, and ZIP code <div style="text-align: center; font-weight: bold;"> Kelly PLC and Sons 1011 Christopher Village Paulastad OR 08120-5293 </div>				3 Social security wages <div style="text-align: center; font-weight: bold;">173644.09</div>		4 Social security tax withheld <div style="text-align: center; font-weight: bold;">13283.77</div>					
				5 Medicare wages and tips <div style="text-align: center; font-weight: bold;">188560.09</div>		6 Medicare tax withheld <div style="text-align: center; font-weight: bold;">5468.24</div>					
				7 Social security tips <div style="text-align: center; font-weight: bold;">173644.09</div>		8 Allocated tips <div style="text-align: center; font-weight: bold;">188560.09</div>					
d Control number <div style="text-align: center; font-weight: bold;">55</div>				9		10 Dependent care benefits <div style="text-align: center; font-weight: bold;">135</div>					
e Employee's first name and initial Last name Suff. <div style="text-align: center; font-weight: bold; margin-top: 10px;"> Thomas Hall 6135 Andrew Corners Apt. 685 Chandlerstad IL 50801-2121 </div>				11 Nonqualified plans <div style="text-align: center; font-weight: bold;">254</div>		12a See instructions for box 12 <div style="text-align: center; font-weight: bold;">B 4786</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 type="checkbox"/> </div>		12b <div style="text-align: center; font-weight: bold;">274</div>					
				14 Other		12c <div style="text-align: center; font-weight: bold;">B 336</div>					
						12d <div style="text-align: center; font-weight: bold;">EE 838</div>					
f Employee's address and ZIP code											
15 State Employer's state ID number <div style="text-align: center; font-weight: bold;">CT 804-73-768</div>		16 State wages, tips, etc. <div style="text-align: center; font-weight: bold;">80736.37</div>		17 State income tax <div style="text-align: center; font-weight: bold;">4097.01</div>		18 Local wages, tips, etc. <div style="text-align: center; font-weight: bold;">167086.64</div>		19 Local income tax <div style="text-align: center; font-weight: bold;">31247.07</div>		20 Locality name <div style="text-align: center; font-weight: bold;">Lewis Knolls</div>	
<div style="text-align: center; font-weight: bold;">CO 066-47-314</div>		<div style="text-align: center; font-weight: bold;">79036.27</div>		<div style="text-align: center; font-weight: bold;">4087.18</div>		<div style="text-align: center; font-weight: bold;">162184.58</div>		<div style="text-align: center; font-weight: bold;">21211.03</div>		<div style="text-align: center; font-weight: bold;">Garcia Lake</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;">633-84-0761</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;">83-4377336</div>				1 Wages, tips, other compensation <div style="text-align: center; font-weight: bold;">162948.5</div>		2 Federal income tax withheld <div style="text-align: center; font-weight: bold;">29776.14</div>					
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				7 Social security tips <div style="text-align: center; font-weight: bold;">173644.09</div>		8 Allocated tips <div style="text-align: center; font-weight: bold;">188560.09</div>					
d Control number <div style="text-align: center; font-weight: bold;">5947925</div>				9		10 Dependent care benefits <div style="text-align: center; font-weight: bold;">135</div>					
e Employee's first name and initial Last name Suff. <div style="text-align: center; font-weight: bold; margin-top: 10px;"> Thomas Hall 6135 Andrew Corners Apt. 685 Chandlerstad IL 50801-2121 </div>				11 Nonqualified plans <div style="text-align: center; font-weight: bold;">254</div>		12a See instructions for box 12 <div style="text-align: center; font-weight: bold;">B 4786</div>					
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				14 Other (see enclosed Notice to Employee)		12c <div style="text-align: center; font-weight: bold;">B 336</div>					
						12d <div style="text-align: center; font-weight: bold;">EE 838</div>					
f Employee's address and ZIP code											
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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

