


		a Employee's social security number <b>401-35-4717</b>		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number (EIN) <b>92-8446496</b>				1 Wages, tips, other compensation <b>86024.94</b>		2 Federal income tax withheld <b>11263.03</b>	
c Employer's name, address, and ZIP code <b>Cole-Hill Group 93788 Hernandez Circle North Gregory WI 82892-2872</b>				3 Social security wages <b>65424.4</b>		4 Social security tax withheld <b>5004.97</b>	
				5 Medicare wages and tips <b>82742.43</b>		6 Medicare tax withheld <b>2399.53</b>	
				7 Social security tips <b>65424.4</b>		8 Allocated tips <b>82742.43</b>	
d Control number <b>63</b>				9		10 Dependent care benefits <b>158</b>	
e Employee's first name and initial Last name Suff.  <b>Brittany Silva 725 Perry Summit Suite 126 East Jeromeview MI 30705-5220</b>				11 Nonqualified plans <b>152</b>		12a See instructions for box 12 C o d e <b>S</b> <b>8211</b>	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o d e <b>EE</b> <b>973</b>	
				14 Other		12c C o d e <b>D</b> <b>308</b>	
						12d C o d e <b>D</b> <b>382</b>	
f Employee's address and ZIP code		15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
		<b>IL 399-47-252</b>		<b>44379.32</b>		<b>2325.73</b>	
		<b>AL 788-16-242</b>		<b>45938.1</b>		<b>3387.19</b>	
				<b>108328.52</b>		<b>16206.86</b>	
						<b>16524.19</b>	
						<b>20 Locality name</b> <b>Rhonda Ports</b>	
						<b>Allison Union</b>	

**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.

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Cut here. Keep lower portion for your records.

		a Employee's social security number <b>401-35-4717</b>		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 <b>92-8446496</b>				1 Wages, tips, other compensation <b>86024.94</b>		2 Federal income tax withheld <b>11263.03</b>	
c Employer's name, address, and ZIP code <b>Cole-Hill Group 93788 Hernandez Circle North Gregory WI 82892-2872</b>				3 Social security wages <b>65424.4</b>		4 Social security tax withheld <b>5004.97</b>	
				5 Medicare wages and tips <b>82742.43</b>		6 Medicare tax withheld <b>2399.53</b>	
				7 Social security tips <b>65424.4</b>		8 Allocated tips <b>82742.43</b>	
d Control number <b>6326141</b>				9		10 Dependent care benefits <b>158</b>	
e Employee's first name and initial Last name Suff.  <b>Brittany Silva 725 Perry Summit Suite 126 East Jeromeview MI 30705-5220</b>				11 Nonqualified plans <b>152</b>		12a See instructions for box 12 C o d e <b>S</b> <b>8211</b>	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o d e <b>EE</b> <b>973</b>	
				14 Other (see enclosed Notice to Employee)		12c C o d e <b>D</b> <b>308</b>	
						12d C o d e <b>D</b> <b>382</b>	
f Employee's address and ZIP code		15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
		<b>IL 399-47-252</b>		<b>44379.32</b>		<b>2325.73</b>	
		<b>AL 788-16-242</b>		<b>45938.1</b>		<b>3387.19</b>	
				<b>108328.52</b>		<b>16206.86</b>	
						<b>16524.19</b>	
						<b>20 Locality name</b> <b>Rhonda Ports</b>	
						<b>Allison Union</b>	

**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

