

b Employer's identification number c Employer's name, address, and ZIP code		26-0020648	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
BLUESTONE LLC			\$	78638.14	13212.00
1 OAKDENE DR STE 200			12b	3 Social security wages	4 Social security tax withheld
BARRINGTON IL 60010-4036			\$		
e Employee's first name and initial Last name		417002997	12c	5 Medicare wages and tips	6 Medicare tax withheld
VINEEL DUSSA			\$		
2087 N LOVINGTON DR			12d	7 Social security tips	8 Allocated tips
APT 206			\$		
TROY MI 48083				9 Verification code	10 Dependent care benefits
f Employee's address and ZIP code			This information is being furnished to the Internal Revenue Service		11 Nonqualified plans
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
MI	26-0020648	78638.14	3342.12	78638.14	78638.14
Form W-2 Wage and Tax Statement 2019		Department of the Treasury-Internal Revenue Service		OMB # 1545-0008	Copy B To Be Filed With Employee's FEDERAL Tax Return

b Employer's identification number c Employer's name, address, and ZIP code		26-0020648	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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2087 N LOVINGTON DR			12d	7 Social security tips	8 Allocated tips
APT 206			\$		
TROY MI 48083				9 Verification code	10 Dependent care benefits
f Employee's address and ZIP code			Copy 2 for State, City, or Local Tax Departments		11 Nonqualified plans
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
MI	26-0020648	78638.14	3342.12	78638.14	78638.14
Form W-2 Wage and Tax Statement 2019		Department of the Treasury-Internal Revenue Service		OMB # 1545-0008	Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

b Employer's identification number c Employer's name, address, and ZIP code		26-0020648	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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Form W-2 Wage and Tax Statement 2019		Department of the Treasury-Internal Revenue Service		OMB # 1545-0008	Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

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APT 206			\$		
TROY MI 48083				9 Verification code	10 Dependent care benefits
f Employee's address and ZIP code			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.		11 Nonqualified plans
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
MI	26-0020648	78638.14	3342.12	78638.14	78638.14
Form W-2 Wage and Tax Statement 2019		Department of the Treasury-Internal Revenue Service		OMB # 1545-0008	Copy C For Employee's Records