Copy B To Be Filed FEDERAL Tax Retu		mployee's		2020 OMB No. 1545-0008		Copy 2 To Be Filed W				
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46-3386035	5 Med	dicare wages and tips	6 M	edicare tax withheld		46-3386035	5 Medic	are wages and tips	6 M	
c. Employer's name, add	lress , an	d ZIP code				c. Employer's name, addres	s, and ZIP	code		
RD Tech Sys	tems	Inc				RD Tech Syste	ms In	С		
499 ERNSTON RD, SUITE A6						499 ERNSTON RD, SUITE A6				
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d. Control number						d. Control number				
e. Employee's name, add					1 '	e. Employee's name, addres				
Rohit Venka 2212 E 86th		Muddapati				Rohit Venkate		ddapati		
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Bloomington	, MN	55425				Bloomington,	MN 55	425		
7 Social security tips		8 Allocated tips			1	7 Social security tips	8	Allocated tips		
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15 State EmpIr.'s state ID # 16 State wages, tips, etc. 18 Local wages, tips,etc. 19 Local income tax				17 State income tax 0 Locality name	1	15 State Emplr.'s state II 18 Local wages, tips, etc.		16 State wages, tips, etc. Local income tax	. 2	
To Local wages, tips,etc.		19 Local income tax	2	o Locality Hame		To Local wages, tips, etc.	19	Local income tax		
Form W-2 Wage and Ta	. Cto to m	ont .		Dept. of the Treasury IRS		Farm W.O.Wana and Tau	Ct- t			
		ned to the Internal Revenue S				Form W-2 Wage and Tax	Statement			
	_				\bot	_				
This information is bei	ng furnis	shed to the IRS. If you are requi	red to	file a tax return, a negligence		AWW2-B22C	Copyrio	ght AccountantsWorld, 2004		
Copy C For EMPLOY			ole &	2020 OMB No.	T	Copy 2 To Be Filed W		-		
See Notice to Emp a. Employee's SSN		ges, tips, other comp.	2 Fe	deral income tax withheld	-	City, or Local Income	Tax Re		2 Fe	
762-73-0286	l wa	23064.00	210	3594.87		762-73-0286	1 wage.	23064.00	216	
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c. Employer's name, add	iress, and	d ZIP code				c. Employer's name, addres	s, and ZIP	code		
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499 ERNSTON PARLIN, NJ						499 ERNSTON F		ITE A6		
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e. Employee's name, address, and ZIP code Rohit Venkatesh Muddapati						e. Employee's name, address Rohit Venkate	s, and ZIP esh Mu	^{code} ddapati		
2212 E 86th	St					2212 E 86th S	St.			
Apt 24	1/27	EE 42E				Apt 24	אואז ריי	425		
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7 Social security tips		8 Allocated tips				7 Social security tips	8	Allocated tips	_[
10 Dependent care bene	efits	11 Nonqualified plans	1:	2a Code See inst. for box 12		10 Dependent care benefits	11	Nonqualified plans	1.	
13 Statutory employee	14 Othe	r	1:	2b Code		13 Statutory employee	14 Other		1.	
	i		- 1		1	1			- 1	

12c Code

12d Code

17 State income tax

Dept. of the Treasury -- IRS

20 Locality name

1036.17

23064.00

39-1908647

16 State wages, tips, etc.
19 Local income tax

Retirement plan

Third party sick pay

18 Local wages, tips, etc.

MD

15 State

18383614

EmpIr.'s state ID#

For m W-2 Wage and Tax Statement

12a Code See inst. for box 12 12b Code Retirement plan 12c Code 12d Code Third party sick pay 23064.00 1036.17 MD18383614 16 State wages, tips, etc. 15 State EmpIr.'s state ID# 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name Form W-2 Wage and Tax Statement 39-1908647 Dept. of the Treasury -- IRS

2020

2 Federal income tax withheld

4 Social security tax withheld
6 Medicare tax withheld

12a Code See inst. for box 12

17 State income tax

Dept. of the Treasury -- IRS 39-1908647

20 Locality name

2020

2 Federal income tax withheld 3594.87

4 Social security tax withheld
6 Medicare tax with held

1036.17

OMB No.

1545-0008

12b Code12c Code12d Code

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