Copy B To Be Filed with Employee's FEDERAL Tax Return. 2020 OMB No. 1545-0008							Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. 2020 OMB No. 1545-0008								
a Employee's SSN	1 Wag	es, tips, oth		2 Federa	l income tax w		a Emp	lovee's SSN	1 Wages		her comp.	2 Federa	al income tax withheld		
810-40-8224			60634.00			714.00	910	-40-8224			60634.00		8714.00		
b Employer ID no. (EIN)	3 Soci	al security v	wages 13354.00	4 Social :	security tax wit	thheld 327.95	-	over ID no. (EIN)	3 Social	,	wages 13354.00	4 Social	security tax withheld 827.95		
46-2566667	5 Medi	icare wage:	s and tips 13354.00	6 Medica	re tax withheld	1 L93.63	1 '	2566667	5 Medic		s and tips 13354.00	6 Medica	are tax withheld 193.63		
c Employer's name, ac SSATECH I	i dress, a NC						c Emp	loyer's name, ad ATECH IN	i Idress, an NC			1			
13800 COPPERMINE RD STE 368							13800 COPPERMINE RD STE 368								
HERNDON	HERNDON VA 20171						HERNDON					VA	VA 20171		
d Control number							d Control number								
e Employee's name, address, and ZIP code Suff. KUMARA SRIRAM MAHIPAL DAMERA 604 TIMON CT APT #103 VIRGINIA BEACH VA 23462						e Employee's name, address, and ZIP code KUMARA SRIRAM MAHIPAL DAMERA 604 TIMON CT APT #103 VIRGINIA BEACH VA 23462									
7 Social security tips 8 Allocated tips		9	9		7 Social security tips		1	8 Allocated tips		9					
10 Dependent care bene	Dependent care benefits 11 Nonqualified plans		12a Code See inst. for box 12			10 Dependent care benefits		efits 1	11 Nonqualified plans		12a Code See inst. for box 12				
13 14 Other Statutory employee Retirement Plan Third-party sick pay			12b Code			13 14		14 Oth	14 Other			12b Code			
				12c Code		Statutory employee						12c Code			
			12d C	12d Code			Retirement Plan Third-party sick pay				12d Code				
VA 30-46256	6667	F-001	6063	34.00	30	016.00	VA	30-46256	6667F	7-001	6063	34.00	3016.00		
15 State Employer's s	tate ID n	umber	16 State wages, tip	os, etc.	17 State inco	me tax	15 State	Employer's state	e ID numl	ber	16 State wages, ti	ps, etc.	17 State income tax		
18 Local wages, tips, etc. 19 Local income tax			20 Locality name			18 Local wages, tips, etc.		c. 1	19 Local income tax		20 Locality name				
Form W-2 Wage and Ta This information is being furn	x Stater ished to th	nent le Internal Re	venue Service.		Dept. of the T	reasury - IRS	Form W	/-2 Wage and Ta	x Stateme	ent		1	Dept. of the Treasury - IR		

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.

Copy C For EMPLOYEE'S RECORDS.

2020

Copy C For EMPLOYEE'S RECORDS. 2020										
(See Notice to E	mploy		OMB No. 1545-0008							
a Employee's SSN	1 Wages, tips, other comp.				2 Federal income tax withheld					
	60634.00				8714.00					
810-40-8224	3 Socia	3 Social security wages				security tax withheld				
b Employer ID no. (EIN)	13354.00				827.95					
	5 Medi	Medicare wages and tips				6 Medicare tax withheld				
46-2566667			13354.00	0 193.						
c Employer's name, ac SSATECH I 13800 COP	NC			_						
HERNDON				V	Ά	20171				
d Control number										
KUMARA SR 604 TIMON VIRGINIA	CT .	APT #			Ά	23462				
	<u> </u>		. 1.0		9					
7 Social security tips		8 Allocate	ea tips	9						
10 Dependent care ben	efits	11 Nonqua	alified plans	12a Code See inst. for box 12						
13	14 Other				12b Code					
Statutory employee				12	12c Code					
Retirement Plan					1.20 0000					
					12d Code					
Third-party sick pay			ı			<u> </u>				
VA 30-46256	F-001	6063	34.0	00	3016.00					
15 State Employer's sta	nber	16 State wages, tip	os, etc		17 State income tax					
18 Local wages, tips, et					20 Locality name					
Form W-2 Wage and Ta	ax Statem	nent				Dept. of the Treasury - IRS				

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Copy 2 To Be Fi					20 B No. 1545-0008			
- *			her comp.		2 Federal income tax withheld			
a Employee's SSN			60634.00	8714.00				
810-40-8224	3 Socia			4 Social	4 Social security tax withheld			
b Employer ID no. (EIN)			13354.00	827.9				
b Employer ID No. (EIN)	5 Medio	care wage	s and tips	6 Medicare tax withheld				
46-2566667			13354.00	193.63				
c Employer's name, ac SSATECH II	NC			8				
HERNDON				VA	20171			
d Control number								
e Employee's name, ac KUMARA SR 604 TIMON VIRGINIA	IRAM CT	MAH] † TPA	IPAL DAME	RA VA	Suff.			
7 Social security tips		8 Allocate	ed tips	9				
10 Dependent care bene	efits '	11 Nonqua	alified plans	12a Code See inst. for box 12				
13	14 Oth	ner		12b Code				
Statutory employee								
Retirement Plan				12c Code				
Third-party sick pay				12d C	ode			
VA 30-462566667F-001			6063	4.00	3016.0			
I 15 State Employer's stat	e ID num	nber	16 State wages, tip	s, etc.	17 State income tax			
18 Local wages, tips, et				20 Locality name				
33.7.45,50					•			
Form W-2 Wage and Ta	v Statem	ont		•	Dept. of the Treasury - I			