Notice to Employee
Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned innour credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size.

Workers without châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the HEI for your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an intante at a penal institution. For 2020 income limits and more information, vist www. ris. gov/EITC.

Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSR, or money amount error reported to the SSA on Form W-2. Be use to get your copies of Form W-2 from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct annear at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than S8.537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than architection for the excess faints your federal more than S1.5012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the excess against your federal more than S1.5012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the structures for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

### Instructions for Employee

Box 1. Eater this amount on the wages line of your tax return.

Box 2. Eater this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8999. Additional Medicar Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips show in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abox \$200.000.

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess gol

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Betieve deferral (codes D, E, F, and S) and designated Roth contributions (codes AA, Ba, and EE) under all plans are generally limited to a total of \$19,500 (\$313,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code Har elimited to \$7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall levit we deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note, If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under

a SIMPLE retirement account that is part of a section 401(k) arrangement

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to

compute any taxable and nontaxable amounts.

Complete Form 8839, Qualified Adoption Expense compute any taxable and nontaxable amounts.

C—lincome from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

requarements.

W—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs)

Y—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-954.

amount is also the clased in to 8x 1. It is volved to an automotical abs to the instructions for Forms 1040 and 1040-SR.

A.A.—Designated Roth contributions under a section 401(k) plan
B.—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not tracible.

B. Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply one outsthetone Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan.

The —Permitted benefits under a qualified small employer health ambusement arrangement
GG—Income from qualified equity grants under section 83(b)
H.—Aggregate defernals under section 83(b) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
RA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement
Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the cleary's parsonage allowance and utilities.

withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable neone, educational assistance payments, or a member of the Cergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation. SOURCE SET OF STEAM SUBSTITUTE OF STEAM SUBSTI

Form W-2 Wage and Tax Statement

2020

Copy C, for employee's records

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 immosed on you if this income is taxable and you fail to report it.

		·ug	and rax	Otatomon		2020	ООР	y o, ioi employ	may be imposed	ed to file a tax return, a negligence penalty on you if this income is taxable and you fa
d Control number  0940-P4110928 0000000141- b Employer's identification number a Employee's		-PAYROL	Void	c Employer's name, address, and ZIP cod ARISTON TEK INC			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
		-09-5649 Third-party		35 JOURNAL SQ - STE 805 JERSEY CITY NJ 07306			1 Wages, tips, other compensation 13872.00	2 Federal Income tax withheld 981.84		
Emp	ployee	pla	plan sick pay					3 Social Security wages 13872.00	4 Social Security tax withheld 860.06	
12 See Instrs. for Box 12		2	14 Other NYSDI NYPFL	7.80 37.45		o Employee's name, address, and ZIP code  NIKHIL S DHOKTE 3117 WHITCOMB ST  CHARLOTTE NC 28269			5 Medicare wages and tips  13872.00 7 Social Security tips  10 Dependent care benefits  Verification Code	6 Medicare tax withheld  201.14  8 Allocated Tips  11 Nonqualified plans
15 State Employer's state l.D. No.  NJ 205-168-980/000  NY 205168980		16 State wages	13	17 State income tax 3872.00 3872.00	529.46	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

# Form W-2 Wage and Tax Statement

2020

# Copy B, to be filed with employee's FEDERAL tax return

0940-P4110928 0000000141-PAYROL			Void	c Employer's name, address, and ZIP code ARISTON TEK INC					Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
20-5	20-5168980 787-0		09-5649	mber	35 JOURNAL SQ - STE 805 JERSEY CITY NJ 07306			1 Wag	es, tips, other compensation 13872.00	2 Federal Income tax within	981.84		
	atutory ployee	Retiren plan	Retirement Third-party plan sick pay								3 Social Security wages 4 Social Security tax withheld		
12 See Instrs. for Box 12		N	14 Other NYSDI NYPFL				o Employee's name, address, and ZIP code NIKHIL S DHOKTE 3117 WHITCOMB ST CHARLOTTE NC 28269			7 Soci	care wages and tips 13872.00 al Security tips sendent care benefits	6 Medicare tax withheld  8 Allocated Tips  11 Nonqualified plans	201.14
15 State NJ NY	NJ 205-168-980/000		16 State wages,	13	3872.00 3872.00	17 State income tax	529.46	18 Local wages, tips, etc.		19 Local income tax	20 Locality name		

## Form W-2 Wage and Tax Statement

2020

## Copy 2, to be filed with employee's tax return for NJ

d Control number Void			c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service						
0940-P	0-P4110928 0000000141-PAYROL			ARISTON TEK INC				OMB No. 1545-0008						
b Employ	yer's identificat	tion number	a Employee's	s social security nu	mber	35 1011	RNAL SO - ST	F 805						
20.51	168980		787	09-5649			•			1 Wage:	s, tips, other compensation		Federal Income tax withhe	
	tutory	Retire		Third-party		JERSE	Y CITY NJ 0730	06			13872	.00		981.84
Empl		plan	ilent	sick pay						3 Social	Security wages	4	Social Security tax withhe	ld
											13872	.00		860.06
12 See Ir	nstrs. for Box 1	2 14	Other			e Employee	's name, address, and ZIP of	code		5 Medic	are wages and tips	6	Medicare tax withheld	
											13872	.00		201.14
						NIKHII	L S DHOKTE			7 Social	Security tips	8	Allocated Tips	
						3117 W	HITCOMB ST							
						CHARI	LOTTE NC 282	69		10 Depe	endent care benefits	11	Nonqualified plans	
										Verif	ication Code			
15 State	Employ	er's state I.I	). No.	16 State wages	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	
NJ	205-168	8-980/0	00		1.	3872.00		529.46						

Notice to Employee
Do you have to file? Refer to the instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (ECL) vom may be able to take the BEC for 2000 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size.

Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can this the BEC if your investment income is more than the specified amount for 2020 or if moome is earned for services provided while you were an intimate at a penal institution. For 2020 in come limits and more information, vist www. size, goveFTC.

Also see Pub. 596, Earned Income Credit. Any BEC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employer to correct your employer to the correct way and a statement, with the Social Security Administration (SSA) to correct any Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount correct reported to the SAs on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct to that early the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also wise the SSA websic are wown.SSA, gov.

Cost of employer-sponsored health coverage (if such osts is provided by the employer). The reporting in Rox IZ using Code DIO, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DIo is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than SS, 537.40 in social security and/or Ter 1 rairoad retirement (RRTA) taxes were withheld, you may be able to chim a credit for the excess against your federal more than (S). The arrangement of the control of the cont

### Instructions for Employee

- Box 1. Enter this amount on the wages line of your tax return.

  Box 2. Enter this amount on the federal income tax withheld line of your tax return.

  Box 5. You may be required to report this amount on Form 899, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8999.

  Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips show; in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abov \$200.000.

SOURCE Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report upon your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax. on Lineported Tip Income, win your income tax return to report at least the allocated if parount unkes you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess gol

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Betieve deferral (codes D, E, F, and S) and designated Roth contributions (codes AA, Ba, and EE) under all plans are generally limited to a total of \$19,500 (\$313,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code Har elimited to \$7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall levit we deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.

Note, If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

B- Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR.

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under

D—Elective deferrals to a section 401(k) cash or deferred arrangement. A a SIMPLE retirement account that is part of a section 401(k) arrangement E—Elective deferrals under a section 403(b) salary reduction agreement F—Elective deferrals under a section 408(k)(6) salary reduction SEP

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—Nontaxable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

 $\label{eq:condition} \begin{array}{ll} 1) \\ T-- Adoption \ benefits \ (not \ included \ in \ box \ 1). \ Complete \ Form \ 8839, \ Qualified \ Adoption \ Expenses, \ to \end{array}$ 

requarements.

W—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs)

Y—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-954.

amount is also the clased in to 8x 1. It is volved to an automotical abs to the instructions for Forms 1040 and 1040-SR.

A.A.—Designated Roth contributions under a section 401(k) plan
B.—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not tracible.

B. Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply one outsthetone Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan.

The —Permitted benefits under a qualified small employer health ambusement arrangement
GG—Income from qualified equity grants under section 83(b)
H.—Aggregate defernals under section 83(b) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
RA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement
Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the cleary's parsonage allowance and utilities.

withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable neone, educational assistance payments, or a member of the Cergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

# Form W-2 Wage and Tax Statement

### 2020

## Copy 2, to be filed with employee's tax return for NY

			_						
				c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service			
0940-P4110928 0000000141-PAYROL				ARISTON TEK INC		OMB No. 1545-0008			
b Employer's identification n	umber a Employee's	social security number	ber	35 JOURNAL SO - STE 805			2 Federal Income tax withheld		
20-5168980	787-0	09-5649	- 1	JERSEY CITY NJ 07306		1 Wages, tips, other compensation 13872.00	2 Federal Income tax withheld 981.84		
	Retirement	Third-party		JERSET CITT NJ 07500					
Employee	plan	sick pay				3 Social Security wages 13872.00	4 Social Security tax withheld 860.06		
12 See Instrs. for Box 12	14 Other		7.80	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
	NYSDI NYPFL					13872.00	201.14		
	NYPFL	3		NIKHIL S DHOKTE		7 Social Security tips	8 Allocated Tips		
			- 1	3117 WHITCOMB ST					
			- (	CHARLOTTE NC 28269		10 Dependent care benefits	11 Nonqualified plans		
						Verification Code			
						verification Code			
15 State Employer's	state I.D. No.	16 State wages, tip	ps, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
NY 205168980	0		138	872.00					
1									

#### Form W-2 Wage and Tax Statement 2020

d Control number Void X					c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMS No. 1545-0008		
b Employer's identification number a Employee's social security number				ımber				1 Wage	es, tips, other compensation	2 Federal Income tax withheld
13 Statutory Retirement Third-party Employee plan sick pay						3 Social Security wages		4 Social Security tax withheld		
12 See Instrs. for Box 12 14 Other			e Employee	s name, address, and ZIP code		5 Medicare wages and tips		6 Medicare tax withheld		
								7 Socia	al Security tips	8 Allocated Tips
								10 Dep	endent care benefits	11 Nonqualified plans
								Veri	fication Code	
5 State Employe	er's state I.D.	No.	16 State wages	, tips, etc.		17 State income tax	18 Local wages, tips, etc.		19 Local income tax	20 Locality name

#### Form W-2 Wage and Tax Statement 2020

d Control number  b Employer's identification nu	mher 3 Employee'		Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's ruenumcation number					1 Wages, tips, other compensation	2 Federal Income tax withheld			
						3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other			e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
						7 Social Security tips	8 Allocated Tips		
						10 Dependent care benefits	11 Nonqualified plans		
						Verification Code			
15 State Employer's st	ate I.D. No.	16 State wages, ti	ips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
1		l		I	l				