PAGE 1

Employee Refe	erence Copy
W-2 Wage and Statement	
Stateme	ent ZUZU OMB No. 1545-0008
Copy C for employee's records.	
d Control number Dept. 001138 CLIF/BEJ	Corp. Employer use only A 48
c Employer's name, address, a	
	SIT STOTEMS
1803 SW REGIO	ONAL ARPT
BENTONVILLE	
	Batch #03171
e/f Employee's name, address, a	Ind ZIP code
NARESH RAM PRASA	
3606 SOUTHWEST DE	EERFIELD BOULE
UNIT 2	
BENTONVILLE AR 727	
b Employer's FED ID number 81-1211993	a Employee's SSA number XXX-XX-0804
1 Wages, tips, other comp.	2 Federal income tax withheld
62886.18	10337.97
3 Social security wages	4 Social security tax withheld
6666.66	413.33
5 Medicare wages and tips 6666.66	6 Medicare tax withheld 96.67
7 Social security tips	8 Allocated tips
	•
9	10 Dependent care benefits
11 Nongualified plans	12a See instructions for box 12
	12b
14 Other	12D 12C
2.00 SUI	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State Employer's state ID no TOTAL STATE	.16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
3320.57	
19 Local income tax	20 Locality name

2020 W-2 and EARNINGS SUMMARY



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	AR. State Wages, Tips, Etc. Box 16 of W-2	
Gross Pay	62,886.18	62,886.18	62,886.18	59,552.85	
Less Exempt Wages	N/A	56,219.52	56,219.52	N/A	
Reported W-2 Wages	62,886.18	6,666.66	6,666.66	59,552.85	

2. Employee Name and Address.

NARESH RAM PRASAD YELLA 3606 SOUTHWEST DEERFIELD BOULE UNIT 2 BENTONVILLE AR 72712

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1 Wages, tips, other comp. 62886.18		al income tax withheld 10337.97	1 Wages, tips, other of 628	comp. 86.18	2 Federa	I income tax withheld 10337.97	1 Wage	s, tips, other 628	comp. 386.18	2 Federa	income tax withhe 10337.9
3 Social security wages 6666.66	4 Social	security tax withheld 413.33	3 Social security wag	_{jes} 66.66	4 Social	security tax withheld 413.33	3 Socia	l security wa 66	ges 66.66	4 Social	security tax withhel 413.3
5 Medicare wages and tips	6 Medica	are tax withheld	5 Medicare wages an	d tips	6 Medica	are tax withheld		are wages a	nd tips	6 Medica	re tax withheld
6666.66		96.67		66.66		96.67			66.66		96.6
d Control number Dept	. Corp.	Employer use only	d Control number	Dept.	Corp.	Employer use only		ol number	Dept.	Corp.	Employer use on A
001138 CLIF/BEJ c Employer's name, address		A 48	001138 CLIF/BEJ c Employer's name, a	ddroco o	ad 7ID and	A 48		CLIF/BEJ	addross a	nd 7IP cod	
INVINCIBLE T			INVINCIBL	,							
INC			INC			-		NC			
1803 SW REG			1803_SW					803 SW			
BENTONVILLE	: AR 727	/12	BENTON	/ILLE /	AR 727	12		BENTON	VILLE	AR 727	12
b Employer's FED ID number	r a Emplo	yee's SSA number	b Employer's FED ID		a Emplo	vee's SSA number	b Empl	oyer's FED II			ee's SSA number
81-1211993 7 Social security tips	8 Alloca	XXX-XX-0804	81-121199 7 Social security tips		8 Allocat	XXX-XX-0804	7 Socia	81-12119		8 Allocat	XX-XX-0804
<u> </u>		iou iipo			• /•••	iou iipo		· · · · · · · · · · · ·			ou iipo
9	10 Depend	dent care benefits	9		10 Depen	dent care benefits	9			10 Depend	ent care benefits
11 Nonqualified plans	12a See ir	nstructions for box 12	11 Nonqualified plans		12a		11 Nonq	ualified plans		12a	
14 Other	12b		14 Other		12b		14 Other			12b	
2.00 SUI	12c				12c					12c	
	12d				12d					12d	
	13 Stat emp	. Ret. plan 3rd party sick pay			13 Stat emp	Ret. plan 3rd party sick pay				13 Stat emp	. Ret. plan 3rd party sic
e/f Employee's name, address	and ZIP code	e	e/f Employee's name, a	address ar	nd ZIP cod	e	e/f Emple	oyee's name,	address a	nd ZIP code))
NARESH RAM PRAS	SAD YELI	LA	NARESH RAM	PRASA	D YELI	A	NARES	H RAM	PRASA	D YELL	A
3606 SOUTHWEST	DEERFIEL	D BOULE	3606 SOUTHWE	ST DE	ERFIEL	D BOULE	3606	SOUTHWI	EST DE	ERFIEL	D BOULE
UNIT 2			UNIT 2				UNIT 2	-			
BENTONVILLE AR 7	2712		BENTONVILLE A	AR 727	12		BENTO	NVILLE	AR 727	12	
15 State Employer's state ID TOTAL STATE	no. 16 State v	wages, tips, etc.	15 State Employer's s AR 66217450-	tate ID no. WHW	16 State v	vages, tips, etc. 59552.85	AR	66217450	state ID no -WHW	. 16 State v	ages, tips, etc. 59552.8
17 State income tax 3320.57		wages, tips, etc.	17 State income tax 32	18.24	18 Local	wages, tips, etc.	17 State	income tax 32	218.24	18 Local	vages, tips, etc.
19 Local income tax	20 Localit	ty name	19 Local income tax		20 Locali	y name	19 Local	income tax		20 Localit	y name
Federal	Filing Co	ору	AR.Stat	te Re	ference	Сору		AR.Sta	te Fili	ing Co	ру
W-2 Wage Stater Copy B to be filed with employee's				age ar atement		2020 OMB No. 1545-0008 Return.	Copy 2 to b	2 ^W e filed with emp	lage ar Stateme	nt	2020 OMB No. 1545-0007 Return.

PAGE 2

PA.State Re	eference Copy
W-2 Wage a Statement	nd Tax 2020
Statement	
Copy 2 to be filed with employee's State	e Income Tax Return.
d Control number Dept. 001138 CLIF/BEJ	Corp. Employer use only A 49
c Employer's name, address, a	
	CH SYSTEMS
1803 SW REGI	
BENTONVILLE	
BEITONVILLE	
	Batch #03171
e/f Employee's name, address, a	Ind ZIP code
NARESH RAM PRASA	D YELLA
3606 SOUTHWEST DI	EERFIELD BOULE
UNIT 2	
BENTONVILLE AR 727	'12
b Employer's FED ID number	a Employee's SSA number
81-1211993 1 Wages, tips, other comp.	2 Federal income tax withheld
62886.18	² Federal income tax withheld 10337.97
3 Social security wages	4 Social security tax withheld
6666.66	413.33
5 Medicare wages and tips	6 Medicare tax withheld
6666.66	96.67
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14. Other	12b
2.00 PA SUI	12c
2.0017(001	12d 13 Stat emp Ret. plan 3rd party sick pay
15 State Employer's state ID no PA 2015 7792	. 16 State wages, tips, etc. 3333.33
17 State income tax 102.33	18 Local wages, tips, etc.
19 Local income tax	20 Locality name



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

Gross Pay Reported W-2 Wages Tips, Etc. Box 16 of W-2 3,333.33 3,333.33

PA. State Wages,

2. Employee Name and Address.

NARESH RAM PRASAD YELLA 3606 SOUTHWEST DEERFIELD BOULE UNIT 2 BENTONVILLE AR 72712

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3 Social security wages 6666.66	4 Social security tax withheld 413.33		
5 Medicare wages and tips 6666.66	6 Medicare tax withheld 96.67		
d Control number Dept.	Corp. Employer use only		
001138 CLIF/BEJ	A 49		
C Employer's name, address, ad INVINCIBLE TEC INC 1803 SW REGIO BENTONVILLE	CH SYSTEMS DNAL ARPT		
b Employer's FED ID number 81-1211993	a Employee's SSA number XXX-XX-0804		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other	12b		
2.00 PA SUI	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pa		
e/f Employee's name, address an	d ZIP code		
NARESH RAM PRASAI 3606 SOUTHWEST DE UNIT 2 BENTONVILLE AR 727	ERFIELD BOULE		
15 State Employer's state ID no. PA 2015 7792	16 State wages, tips, etc. 3333.33		
17 State income tax 102.33	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
PA.State Fili	ng Copy		

Copy 2 to be filed with employee's State Income Tax Return.

2 Federal income tax withheld

10337.97

Wages, tips, other comp. 62886.18

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 8959, Additional Medicare 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 shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

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

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless 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 employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits). **Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes thris year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you acopy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 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 H are limited 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 elective 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.

 ${\bf A-}$ Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. ${\bf B-}$ Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C – Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

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

 ${\rm G-Elective}$ deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

 ${\rm H-Elective}$ deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J- Nontaxable sick pay (information only, not included in box 1, 3, or 5) K-20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L-Substantiated employee business expense reimbursements (nontaxable)

M-Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

 P-Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)
Q-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—Employee salary reduction 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.
V – Income 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.

 W-Employer 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

2-income under a hondpaline deterred compensation plan that has 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-SR.

EE-Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i) **HH**—Aggregate deferrals under section 83(i) 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 IRA 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 clergy'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.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):

TAX	RETURN
THIS FORM W-2	OTHER W-2'S

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 don't 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 (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 the 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't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. See also 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.

Clergy and religious workers. If you aren't subject to social security 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, SSN, or money amount error reported to the SSA on Form

W-2. Be sure to get your copies of Form W-2c 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 name 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 \$8,537.40 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 one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.