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 fir 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 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, 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 archive for the excess fave your federal income tax. If you had more than ore than 65.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the excess against your federal income tax. If you had more than ore than 65.012.70 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.

### 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.

SOURCE SET OF STEAM SUBSTITUTE OF STEAM SUBSTI

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.

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

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. Elective deferrals (codes D. R. F. and S) and designated Roth contributions (codes A. B. Ba and ED) under all plans are generally limited to a total of \$91,500 (15),300 if you only have SIMPLE plans; \$22,500 for section 40(8) plans if you qualify for the 15-year rule explained in \$7,000. Horizan kinder code Har emited to \$7,000. Deferrals under code Gar emited to \$7,000. Deferrals under code Gar emited to \$10,500. Deferrals under code Har emited to \$7,000. Horizan kinder of \$7,000. Horizan kin 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

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontraxble 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—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (calleteria) 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 othecked, 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 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 imposed on you if this income is taxable and you fail to report it.

								, -, ioi oiiipio,	máy be imposed	on you if this income is taxable and you	
d Control	number		Void			c Employer	s name, address, and ZIP code		Department of the Treasury - Internal Revenue Service		
0940-Y	426X875 0000000974-IT RES			IT RES	OURCES INC		OMB No. 1545-0008				
b Employe	er's identificatio	n numb	er a Employee's	social security nu	ımber	220 CO	NTINENTAL DR		1 Wages, tips, other compensation	2 Federal Income tax withheld	
45-43	13691		774-8	87-4370		STE#10	)4		89691.78		
13 Statu Emplo		Reti	rement	Third-party sick pay		~			3 Social Security wages	4 Social Security tax withheld	
Employee plan						NEWARK DE 19713			89691.78	5560.89	
12 See Instrs. for Box 12 1		14 Other			e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
									89691.78	1300.5	
						NARENDAR REDDY PASHAM 1600 N ARIZONA AVE			7 Social Security tips	8 Allocated Tips	
						APT #2	044		10 Dependent care benefits	11 Nonqualified plans	
						CHANI	DLER AZ 85225		Verification Code		
15 State	Employe	r'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	
AZ	4543136	91			59	9652.30	1610.64				
NC	6008865	92			30	0039.48	1371.00				

# Form W-2 Wage and Tax Statement

2020

2020

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

	d Control number Void 0940-Y426X875 0000000974-IT RES			c Employer's name, address, and ZIP code IT RESOURCES INC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
45-4.	45-4313691 774-		774-	e's social security number -87-4370 Third-party sick pay		220 CONTINENTAL DR STE#104 NEWARK DE 19713			1 Wages, tips, other compensation 89691.78 2 Federal Income tax withheld 13740  3 Social Security wages 89691.78 4 Social Security tax withheld 5560			
12 See I	12 See Instrs. for Box 12 14 Othe		Other			NAREN 1600 N APT #2	's name, address, and ZIP code NDAR REDDY PASH ARIZONA AVE 044 DLER AZ 85225	AM	7 Soc	icare wages and tips 89691.78 all Security tips sendent care benefits	6 Medicare tax withheld  1300 8 Allocated Tips  11 Nonqualified plans	0.53
15 State AZ NC	Z 454313691				9652.30 9039.48	17 State income tax 1610.6		•	19 Local income tax	20 Locality name		

## Form W-2 Wage and Tax Statement

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

d Control number Void			c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service						
0940-Y				IT RESOURCES INC				OMB No. 1545-0008						
b Employer's identification number a Employee's social security number				220 CONTINENTAL DR					1 Wages, tips, other compensation 2 Federal Income tax withheld					
45-43	313691		774-8	37-4370		STE#10	14			1 Wages,	, tips, other com	89691.78	2 Federal Income tax wit	13740.16
13 Stat Empl		etirement an	·	Third-party sick pay			RK DE 19713	3		3 Social	Security wages	89691.78	4 Social Security tax wit	
12 See Ir	nstrs. for Box 12	14 Ot	ther			e Employee	s name, address, and 2	ZIP code		5 Medica	are wages and tip	89691.78	6 Medicare tax withheld	1300.53
			NARENDAR REDDY PASHAM					Security tips	07071.70	8 Allocated Tips	1300.33			
						1600 N	ARIZONA A	VE						
						APT #2044				10 Dependent care benefits		11 Nonqualified plans		
						CHANI	DLER AZ 852	225		Verific	cation Code			
15 State	Employer's sta	te I.D. No	o. I	16 State wages		2552.20	17 State income tax		18 Local wages, tips, etc.	1	19 Local incom	e tax	20 Locality name	
AZ	454313691				5	9652.30		1610.64						

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 take the EUC if your investment income is more than the specified amount for 2020 or if moome is earned for services provided while you were an intained at a penal institution. For 2020 in come limits and more information, vist we wis zeyovETTC.

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 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 Box 12, 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 con

### 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.

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 golden parachute payments. See the instructions for forms 1040 and 1040-SR.

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 othecked, 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 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

# Form W-2 Wage and Tax Statement

### 2020

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

d Control number		Void	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
0940-Y426X875 0000	0000974-IT RES		IT RESOURCES INC				
b Employer's Identification number 45-4313691	a Employee's social security no 774-87-4370	ımber	220 CONTINENTAL DR STE#104	1 Wages, tips, other compensation 2 Federal Income tax withheld 89691.78			
13 Statutory Retirem Employee plan	Retirement Third-party plan sick pay		NEWARK DE 19713	3 Social Security wages 89691.78	4 Social Security tax withheld 5560.89		
12 See Instrs. for Box 12 14	Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips 89691.78	6 Medicare tax withheld 1300.53		
			NARENDAR REDDY PASHAM 1600 N ARIZONA AVE	7 Social Security tips	8 Allocated Tips		
			APT #2044 CHANDLER AZ 85225	10 Dependent care benefits	11 Nonqualified plans		
			CHANDLER AZ 63223	Verification Code			
15 State Employer's state I.D NC 600886592	. No. 16 State wages		17 State income tax 1371.00 18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

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

d Control number		Voi X	c Employer	's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	r a Employee's soo	cial security number				1 Wages, tips, other compensation 2 Federal Income tax withhele		
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	o'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 state I.D. No. 16 State wages, tips, etc		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 Identification frumber					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				