

b Employer's Identification number		81-0930594		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code		ITSYNTAX INC 207 EAST HOLLY AVENUE SUITE #203 STERLING VA 20164		\$	72185.09	9888.71
e Employee's first name and initial		Last name 6856902		12b	3 Social security wages	4 Social security tax withheld
SANJANA JETTY 7044 SONYA DR NASHVILLE TN 37209				\$	60851.75	3772.81
f Employee's address and ZIP code		15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax		12c	5 Medicare wages and tips	6 Medicare tax withheld
				\$	60851.75	882.35
				12d	7 Social security tips	8 Allocated tips
				\$		
				This information is being furnished to the Internal Revenue Service		9
				Copy B To Be Filed with Employee's FEDERAL Tax Return		10 Dependent care benefits
				a Employee's soc. sec. no		11 Nonqualified plans
				698-76-8035		13 Statutory employee Retirement plan Third-party sick pay
						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
						14 Other
Form W-2 Wage and Tax Statement 2020		Department of the Treasury-Internal Revenue Service		OMB # 1545-0008		Copy B To Be Filed With Employee's FEDERAL Tax Return

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				Copy 2 for State, City, or Local Tax Departments		10 Dependent care benefits
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Form W-2 Wage and Tax Statement 2020		Department of the Treasury-Internal Revenue Service		OMB # 1545-0008		Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

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				\$		
				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.		9
				Copy 2 for State, City, or Local Tax Departments		10 Dependent care benefits
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				Copy C for Employee's Records (see notice to Employee on back.)		10 Dependent care benefits
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