

PDGAGR00500962 AHMED SHABBIR 10070 GILBERT ST APT 2 **ANAHEIM CA 92804**

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.

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 Cost of employer-sponsored health coverage (if such cost is Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct taxable. Copies B, C, and 2 and ask your employer to correct your Credit for excess taxes. If you had more than one employer in than a certain amount. The amount of the credit is based Security Administration (SSA) to correct any name, SSN, or on income and family size. Workers without children could money amount error reported to the SSA on Form W-2. Be sure qualify for a smaller credit. You and any qualifying children to get your copies of Form W-2c from your employer for all must have valid social security numbers (SSNs). You can't corrections made so you may file them with your tax return. If take the EIC if your investment income is more than the your name and SSN are correct but aren't the same as shown 1040-SR and Pub. 505, Tax Withholding and Estimated Tax. specified amount for 2020 or if income is earned for on your social security card, you should ask for a new card that services provided while you were an inmate at a penal displays your correct name at any SSA office or by calling institution. For 2020 income limits and more information, 800-772-1213. You may also visit the SSA website at www.SSA.gov.

security and Medicare taxes, see Pub. 517, Social Security and 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

Earned income credit (EIC). You may be able to take the employment record. Be sure to ask the employer to file Form 2020 and more than \$8,537.40 in social security and/or Tier 1 EIC for 2020 if your adjusted gross income (AGI) is less W-2c, Corrected Wage and Tax Statement, with the Social railroad retirement (RRTA) taxes were withheld, you may be able 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

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

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wanes and tine 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

You must rise roim 4.137, you asked as eaching and welcade it also nutreported by Income, with you'r 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 by our 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 very tenderly.)

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

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 if it is a prior year deterral under a monqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfielture 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, and you are orn blib eage 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and the substance with the second security of the second second security of the second ion and give you a copy

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 ele athe 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

te: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pensior 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.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or

P—Incollected Social Security of NRTA action up.s. Include this action for Incollected Medicare tax on figs. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

Instructions for Forms 1040 and 1040-SR.

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

—Elective defermals to a section 401(k) cash or deferred arrangement. Also includes deferreds under a SIMPLE retirement account that is part of a section 401(k) arrangement.

Elective defermals under a section 403(k) salary reduction aggreement.

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

—Elective defermals under a section 408(k)(6) salary reduction SEP.

-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

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

Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontavable sick pay (information only, not included in box 1, 3, or 5)

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

L—Substantiated employee business expense reimbursements (nontavable)

M—Incollected social security or RRTA tax on taxable cost of group-term life insurance ow
\$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—Evolvichity moving expenses employments and direction a member of the LLS.

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

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)

-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption

T—Audition the rains (in thickness in the control of the cont

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

Y—Determas under a section 4/UsA nonqualited deterred compensation plain
Z—Income under a nonqualified deferred compensation plain that fals to satisfy section 4/09A.
This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See
the Instructions for Forms 1/04 and 1/04/0-SR.

AA—Designated Roth contributions under a section 4/01(k) plan
BB—Designated Roth contributions under a section 4/03(k) plan
DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

is not taxable. EE—Designated Roth contributions under a gover 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

HH—Aggregate deferrats 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. Employees 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 an member of the clergly's parsonare allowance and utilities. Ratinad employers use this box to report traditional detirement (IRRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips recorded by the employee in tale the employer in lateral retirement (IRTA) compensation. reported by the employee to the employer in raincad retirement (RRTA) compensation.

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

Form W-2 Wage and Tax Statement 2020 OME	3 No. 1545-0008	Departme	ent of the Treasu	ry - Internal Reveni	ue Service		
Control number		Employer identification number 47-3600855		Copy 2To Be Filed With Employee's State, City, or Local Income Tax Return			
Employer's name, address, and ZIP code Kelly Services USA, LLC		Employee's SSN 039-71-9431		1 Wages, tips, o	other compensation 500.00	2 Federal income tax withheld	
999 West Big Beaver Rd. STE 601A		7 Social security ti	ps	3 Social securit	ty wages 500.00	4 Social security tax withheld 31.00	
Troy MI 48084		8 Allocated tips		5 Medicare way		6 Medicare tax withheld	
Employee's first name and initial	Last Name Suffix				500.00	7.25	
AHMED SHABBIR		9		10 Dependent care benefits		11 Nonqualified plans	
10070 GILBERT ST							
APT 2		12a		13 Statutory E		Other CA-VPDI 5.00	
ANAHEIM CA 92804		12b		Retiremen	=	5.00	
	12c		Third-party sick pay				
Employee's address and ZIP code	12d						
15 State Employer's State ID number 473600855	16 State wages, tips, etc. 500.00	17 State income tax 7.46	18 Local wage	es, tips, etc.	19 Local income tax	20 Locality name	

This information is being furnished to the Internal Revenue Service

Form W-2 Wage and Tax Statement 2020 OMB No. 1545-0008	Department of the Treasu	ry - Internal Revenue Service			
Control number	Employer identification number 47-3600855	Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return			
Employer's name, address, and ZIP code Kelly Services USA, LLC	Employee's SSN 039-71-9431	1 Wages, tips, other compensation 500.00	2 Federal income tax withheld		
999 West Big Beaver Rd. STE 601A	7 Social security tips	3 Social security wages 500.00	4 Social security tax withheld 31.00		
Troy MI 48084	8 Allocated tips	5 Medicare wages and tips	6 Medicare tax withheld		
Employee's first name and initial Last Name Suffix		500.00	7.25		
AHMED SHABBIR	9	10 Dependent care benefits	11 Nonqualified plans		
10070 GILBERT ST					
APT 2	12a	13 Statutory Employee 14 C	Other A-VPDI 5.00		
ANAHEIM CA 92804	12b	Retirement Plan			
	12c	Third-party sick pay	!		
Employee's address and ZIP code	12d	Trilld-party sick pay			
15 State Employer's State ID number 16 State wages, tips, etc.	17 State income tax 18 Local wage	es, tips, etc. 19 Local income tax	20 Locality name		
CA 473600855 500.00	7.46				

This information is being furnished to the Internal Revenue Service

orm W-2 Wag	ge and Tax Statement 2020 OME	3 No. 1545-0008	Departme	ent of the Treasur	ry - Internal Reven	ue Service	
Control number		Employer identification number 47-3600855		COPY B To Be Filed With Employee's FEDERAL Tax Return			
Employer's name, address, and ZIP code Kelly Services USA, LLC 999 West Big Beaver Rd. STE 601A Troy MI 48084 Employee's first name and initial Last Name Suffix		Employee's SSN 039-71-9431		1 Wages, tips, other compensation 500.00		2 Federal income tax withheld	
		7 Social security tips		3 Social security wages 500.00		4 Social security tax withheld 31.00	
		8 Allocated tips		5 Medicare wages and tips 500.00		6 Medicare tax withheld 7.25	
AHMED SHABBIR 10070 GILBERT ST APT 2 ANAHEIM CA 92804			9		10 Dependent care benefits		11 Nonqualified plans
			12a 12b		13 Statutory Employee		Other CA-VPDI 5.00
			12c		Third-party sick pay		
Employee's address and ZIP code			12d		Trind party clork pay		
15 State CA	Employer's State ID number 473600855	16 State wages, tips, etc. 500.00	17 State income tax 7.46	18 Local wage	es, tips, etc.	19 Local income tax	20 Locality name

This information is being furnished to the Internal Revenue Service

Control number			Employer identification number 47-3600855		COPY C For Employee's Records (See Notice to Employee on back of Copy B)			
	's name, address, and ZIP code vices USA, LLC			Employee's SSN 039-71-9431		1 Wages, tips,	other compensation 500.00	2 Federal income tax withheld
999 West Big Beaver Rd. STE 601A		7 Social security tips		3 Social security wages 500.00		4 Social security tax withheld 31.00		
Troy MI 4		Last Name	Suffix	8 Allocated tips		5 Medicare wa	ges and tips 500.00	6 Medicare tax withheld 7.25
AHMED SHABBIR 10070 GILBERT ST			9		10 Dependent care benefits		11 Nonqualified plans	
APT 2	MEDERT OF			12a		13 Statutory E	Employee 🔲 14 (Other CA-VPDI 5.00
ANAHEIM CA 92804 Employee's address and ZIP code			12b		Retirement Plan			
			12c		Third-party sick pay			
			12d		Triiid party clork pay			
15 State CA	Employer's State ID number 473600855	16 State wages, tip	s, etc. 00.00	17 State income tax 7.46 18 Local wage		es, tips, etc.	19 Local income tax	20 Locality name



EARNED INCOME TAX CREDIT NOTIFICATION

All California employers are required to notify all of their employees of both the federal and California Earned Income Tax Credit (EITC).

Revenue and Taxation Code, § 19853 requires any employer, who is subject to, and is required to provide unemployment insurance to employees, to notify all employees that they may be eligible for the EITC. Employers shall give notification within one week before or after, or at the same time, they provide employees with an annual wage summary (IRS Form W-2, 1099).

NOTICE TO EMPLOYEES

Based on your annual earnings, you may be eligible to receive the Earned Income Tax Credit (EITC) from the federal government. The federal EITC is a refundable federal income tax credit for low-income working individuals and families. The federal EITC has no effect on certain welfare benefits. In most cases, federal EITC payments will not be used to determine eligibility for Medicaid, supplemental security income, food stamps, low-income housing, or most temporary assistance for needy families payments. Even if you do not owe federal taxes, you must file a federal tax return to receive the federal EITC. Be sure to fill out the federal EITC form in the federal income tax return booklet. For information regarding your eligibility to receive the EITC, including information on how to obtain the IRS Notice 797, or any other necessary forms and instructions, contact the Internal Revenue Service at 1-800-829-3676 or through its website at https://www.irs.gov/.

You also may be eligible to receive the California EITC. The California EITC is a refundable state income tax credit for low-income working individuals and families. The California EITC is treated in the same manner as the federal EITC and generally will not be used to determine eligibility for welfare benefits under California law. To claim the California EITC, even if you do not owe California taxes, you must file a California income tax return and complete and attach the California EITC form (FTB 3514). For information on the availability of the credit, eligibility requirements, and how to obtain the necessary California forms and get help filing, contact the Franchise Tax Board at 1-800-852-5711 or through its website at www.ftb.ca.gov.