## 2020 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records.
d Control number Dept.

801867 ATLA/AF2 135035

Corp. Employer use only

Employer's name, address, and ZIP code ELIASSEN GROUP LLC 55 WALKERS BROOK DR 6 FL READING MA 01867

Batch #03392

2666

e/f Employee's name, address, and ZIP code

KARTHIK TUMU 7338 SOUTH 184TH STREET **OMAHA NE 68136** 

b	Employer's FED ID number 04-3097449	a Employee's SSA number XXX-XX-5032				
1	Wages, tips, other comp.	2 Federal income tax withheld				
	9000.00	964.65				
3	Social security wages	4 Social security tax withheld 558.00				
	9000.00					
5	Medicare wages and tips	6 Medicare tax withheld				
	9000.00	130.50				
7	Social security tips	8 Allocated tips				
9 11 Nonqualified plans		10 Dependent care benefits				
		12a See instructions for box 12				
	Ott	12b				
14	Other	12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pay				
	State Employer's state ID no NE 13327410	o. 16 State wages, tips, etc. 9000.00				
17 State income tax 485.66		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.

Wages, Tips, other Social Security Compensation Box 1 of W-2 Wages Box 3 of W-2

Gross Pay 9,000.00 Reported W-2 Wages 9,000.00

9,000.00 9,000.00 9,000.00

Medicare

Box 5 of W-2

Wages

Box 16 of W-2 9,000.00

Tips, Etc.

NE. State Wages,

9,000.00 9,000.00

2. Employee Name and Address.

KARTHIK TUMU 7338 SOUTH 184TH STREET OMAHA NE 68136

@ 2020 ADP, Inc.

1	1 Wages, tips, other comp. 9000.00						tax withheld 964.65
3	9000.00		9000.00 558.00 e wages and tips 6 Medicare tax withheld				
5							
d	Control number	Dept.	Corp.	Emplo	yer use only		
801867 ATLA/AF2 135035			A	2666			

**ELIASSEN GROUP LLC** 55 WALKERS BROOK DR 6 FL READING MA 01867

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9		10 Dependent care benefits		
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14	Other	12b		
		12c		
		12d		
		13 Stat emp. Ret. plan 3rd party sick pay		

KARTHIK TUMU 7338 SOUTH 184TH STREET OMAHA NE 68136

15 State Employer's state ID no. NE 13327410 17 State income tax 485,66		. 16 State wages, tips, etc. 9000.00		
		18 Local wages, tips, etc.		
19 Local income tax		20 Locality name		

1 Wages, tips, other comp. 9000.00		2 Federal income tax withhe 964.			tax withheld 964.65	
3	3 Social security wages 9000.00		4 Social security tax withheld 558.00			
5	Medicare wages an 90	d tips 00.00	6 M	edica	are tax wi	thheld 130.50
d	Control number	Dept	Co	rp.	Emplo	yer use only
80	1867 ATLA/AF2	135035			Α	2666
c	c Employer's name, address, an			cod	e	
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ELIASSEN GROUP LLC 55 WALKERS BROOK DR 6 FL READING MA 01867

b	Employer's FED ID number 04-3097449	a Employee's SSA number XXX-XX-5032			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a			
14	Other	12b			
		12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pay			
e/f	Employee's name, address a	nd ZIP code			

KARTHIK TUMU 7338 SOUTH 184TH STREET OMAHA NE 68136

	Employer's state ID no. 13327410	16 State wages, tips, etc. 9000.00
17 State	income tax 485.66	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name

1	1 Wages, tips, other comp. 9000.00		2 Federal income tax with 964.			tax withheld 964.65
3	3 Social security wages 9000.00			Social	security	tax withheld 558.00
5	5 Medicare wages and tips 9000.00		6	Medica	are tax w	ithheld 130.50
d	Control number	Dept		Corp.	Empl	oyer use only
801867 ATLA/AF2 135035					Α	2666

ELIASSEN GROUP LLC 55 WALKERS BROOK DR 6 FL READING MA 01867

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