2020 W-2 and EARNINGS SUMMARY



Employee Reference Copy

Wage and Tax Statement Copy C for employee's records.
d Control number Dept. 055271 ATLA/ZF7 103200 A Employer's name, address, and ZIP code ARICENT N A INC 3979 FREEDOM CIRCLE #950 SANTA CLARA CA 95054 Batch #03664 e/f Employee's name, address, and ZIP code PRAMOD SINGH 36 ROYAL CREST DRIVE **APARTMENT 6** MARLBOROUGH MA 01752

a Employee's SSA number XXX - XX - 0984

4 Social security tax withheld

6 Medicare tax withheld

12a See instructions for box 12

18 Local wages, tips, etc.

20 Locality name

12d | 13 Stat emp. Ret. plan 3rd party sick par

8 Allocated tips 10 Dependent care benefits

12c

16319.66

8537.40

2031.18

82.60

140081.06

Employer's FED ID number

Medicare wages and tips 140081.06

3 Social security wage

Social security tips

11 Nonqualified plans

19 Local income tax

14 Other

20-1867090 Wages, tips, other comp.

140081.06

137700.00

520.51 MAPFML 25.00 TFB

MA WTH10371480-003

17 State income tax 6557.38

15 State Employer's state ID no. 16 State wages, tips, etc

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	MA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	142,525.06	142,525.06	142,525.06	142,525.06
Plus GTL (C-Box 12)	82.60	82.60	82.60	82.60
Less Other Cafe 125	2,526.60	2,526.60	2,526.60	2,526.60
Wages Over Limit	N/A	2,381.06	N/A	N/A
Reported W-2 Wages	140,081.06	137,700.00	140,081.06	140,081.06

2. Employee Name and Address.

PRAMOD SINGH 36 ROYAL CREST DRIVE APARTMENT 6 MARLBOROUGH MA 01752

© 2020 ADP, Inc Fold and Detach Here

1 Wages, tips, other comp. 140081.06	2 Federa	2 Federal income tax withheld 16319.66			
3 Social security wages 137700.00	4 Social	4 Social security tax withheld 8537.40			
5 Medicare wages and tips 140081.06	6 Medica	6 Medicare tax withheld 2031 . 18			
d Control number Dept.	Corp.	Corp. Employer use ont			
055271 ATLA/ZF7 10320 c Employer's name, address,					
3979 FREEDOI SANTA CLARA	A CA 95	5054	SA number		
20-1867090		XXX-XX-0984			
7 Social security tips	8 Alloca	ted tips			
9	10 Depend				
11 Nonqualified plans	C	structio	82.60		
14 Other	12b				
520.51 MAPFML	12c				
320.31 MP4 1 ML	12d				
25.00 TFB	1				
25.00 TFB	13 Stat emp		3rd party sick pay		
25.00 TFB 27 Employee's name, address a PRAMOD SINGH 26 ROYAL CREST [APARTMENT 6 MARLBOROUGH MA	13 Stat emp and ZIP code ORIVE 01752				
25.00 TFB 27 Employee's name, address a PRAMOD SINGH 26 ROYAL CREST [APARTMENT 6 MARLBOROUGH MA	13 Stat emp. 13 Stat emp. DRIVE 01752 0. 16 State w	ages, tip	os, etc. 140081.06		
25.00 TFB 27 Employee's name, address a PRAMOD SINGH 26 ROYAL CREST DAPARTMENT 6 MARLBOROUGH MA 25 State Employer's state ID no MA WTH10371480-00	13 Stat emp and ZIP code DRIVE 01752 0.16 State w	vages, tip	os, etc. 140081.06		
e/I Employee's name, address a PRAMOD SINGH 36 ROYAL CREST D APARTMENT 6 MARLBOROUGH MA 15 State Employer's state ID no MA WTH10371480-00 17 State income tax	13 Stat emp. and ZIP code DRIVE 01752 0. 16 State w 03 18 Local v 20 Locality	vages, tip	os, etc. 140081.06		

1 Wages, tips, other comp. 140081.06	2 Federal income tax withheld 16319.66		
3 Social security wages 137700.00	4 Social security tax withheld 8537.40		
5 Medicare wages and tips 140081.06	6 Medicare tax withheld 2031.18		
d Control number Dept.	Corp.	Emple	oyer use only
055271 ATLA/ZF7 103200		A	127
c Employer's name, address, a	nd ZIP cod	le	
ARICENT N A 3979 FREEDOM SANTA CLARA	CIRCL		50
b Employer's FED ID number 20-1867090 7 Social security tips	a Employee's SSA number XXX - XX - 0984		
, Social security tips	8 Allocated tips		
9	10 Dependent care benefits		e benefits
11 Nongualified plans	12a		
11 Nonqualified plans	C		82.60
14 Other	12b		02.00
500 54 145054	12c	-	
520.51 MAPFML 25.00 TFB	12d		
2000 112		1-	
	13 Stat emp	Ret plan	3rd party sick pay
e/f Employee's name, address a PRAMOD SINGH 36 ROYAL CREST D APARTMENT 6 MARLBOROUGH MA	RIVE	е	
15 State Employer's state ID no MA WTH10371480 - 00:	3		140081.06
17 State income tax 6557.38	18 Local		ps, etc.
19 Local income tax	20 Locali		
MA.State R	eferen nd Tax	ce C	n 20

1 Wages, tips, other comp. 140081.06		2 Federal income tax withheld 16319.66			
Social security wages 137700.00		4 Social security tax withheld 8537 . 40			
5 Medicare wages and tips 140081.06		6 Medicare tax withheld 2031.18			
d Control number	Dept	Corp.	Emple	oyer use only	
055271 ATLA/ZF7 1	03200		A	127	
ARICENT I 3979 FREE SANTA CL	DOM	CIRCI		50	
Employer's FED ID number 20-1867090		a Employee's SSA number XXX - XX - 0984			
7 Social security tips		8 Allocated tips			
9		10 Dependent care benefits			
11 Nonqualified plans				82.60	
14 Other		12b	1		
520.51 MA	PFML	12c	1		
25.00 TFE		12d	1		
		13 Stat e	mp. Ret. pla	an 3rd party sich	
e/f Employee's name, a PRAMOD SINGI 36 ROYAL CRE APARTMENT 6 MARLBOROUGI 15 State Employer's st	H ST [H MA	ORIVE	2		
MA WTH10371	+80-00			140081.0	
6557.38		18 Local wages, tips, etc.			
19 Local income tax		-	ality name	•	
W-2 W	age	iling and Ta ment		020	