2020 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement Copy C for employee's records. d Control number Corp. Employer use only RG/H9I

NEW ENGLAND IT ASSOCIATES INC

15 NEW ENGLAND EXECUTIVE PARK **BURLINGTON, MA 01803**

Batch #92798

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

Employer's name, address, and ZIP code

10210 HAWK STORM AVE **TAMPA**, FL 33610

b	Employer's FED ID number 27-1953716	a Employee's SSA number XXX-XX-3159				
1	Wages, tips, other comp.	2 Federal income tax withheld				
	10000.00	1043.66				
3	Social security wages	4 Social security tax withheld				
5	Medicare wages and tips	6 Medicare tax withheld				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a See instructions for box 12				
14	Other	12b				
'-	Other	12c				
		12d				
		13 Stat emp Ret. plan 3rd party sick pay				
15	State Employer's state ID no.	16 State wages, tips, etc.				
17	State income tax	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 Compensation Box 1 of W-2

Social Security Wages Box 3 of W-2

Medicare Wages Box 5 of W-2

Gross Pav Reported W-2 Wages 10,000.00 10,000.00

10,000.00 0.00

10,000.00 0.00

2. Employee Name and Address.

MANOJ KUMAR DEGA 10210 HAWK STORM AVE TAMPA, FL 33610

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4 Social security tax withheld			
6 Medicare tax withheld			
Corp.	Employer use only		
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b	Employer's FED ID number 27-1953716	a Employee's SSA number XXX-XX-3159
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12
14	Other	12b
		12c
		12d
		13 Stat emp Ret. plan 3rd party sick pay
ω/f	Employee's name address an	d ZIP code

MANOJ KUMAR DEGA 10210 HAWK STORM AVE TAMPA, FL 33610

15	State	Employer'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		
		Fac	laral	Fili	ing Conv	

Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

1 Wages, tips, other co	omp.)0.00	2 Federal income tax withheld 1043.66					
3 Social security wage	es	4 Social security tax withheld					
5 Medicare wages and tips		6 Medicare tax withheld					
d Control number	d Control number Dept.		Employer use only				
000189 RG/H9I			Α				
c Employer's name, address, and ZIP code							

NEW ENGLAND ASSOCIATES INC 15 NEW ENGLAND EXECUTIVE PARK

BURLINGTON, MA 01803

b	Employer's FED ID number 27-1953716	a Employee's SSA number XXX-XX-3159
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

MANOJ KUMAR DEGA 10210 HAWK STORM AVE TAMPA, FL 33610

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Ī	15	State	Employer's	state	ID no.	16	State	wages,	tips,	etc.	
Ī	17	State	income tax			18	Local	wages,	tips,	etc.	
	19	Local	income tax			20	Locali	ty nam	е		
Γ			Sta	ate	Refe	r۵	nce	-	nv		

Wage and Tax Statement

1	1 Wages, tips, other comp. 10000.00			2 Federal income tax withheld 1043.66			
3	3 Social security wages			Social security tax withheld			
5	5 Medicare wages and tips			Medica	re tax withheld		
d	Control number	Dept.		Corp.	Employer use only		
0.0	0189 RG/H9I				Α		

c Employer's name, address, and ZIP code

NEW ENGLAND IT ASSOCIATES INC 15 NEW ENGLAND EXECUTIVE PARK **BURLINGTON, MA 01803**

b	Employer's FED ID number 27-1953716	a Employee's SSA number XXX-XX-3159			
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			
	Employee's name address s				

MANOJ KUMAR DEGA 10210 HAWK STORM AVE TAMPA, FL 33610

wages, tips, etc.
•
al wages, tips, etc.
ality name
inty name

or Local Reference Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return