

Copy B To Be Filed With Employee's		2020		OMB No. 1545-0008	
a Employee's SSN 791-02-3829		1 Wages, tips, other comp. 55,000.07		2 Federal income tax withheld 7,637.51	
b Employer ID number 461314041		3 Social security wages		4 Social security tax withheld	
c Employer's name, address, and ZIP code DISTRICT PROPERTIES COM INC 6500 CHILLUM PLACE, NW WASHINGTON, DC 20012		5 Medicare wages and tips		6 Medicare tax withheld	
d Control Number 3		e Employee's name, address, and ZIP code RAHUL Y. CHANDRASEKAR 6048 RAINA DRIVE CENTREVILLE, VA 20120		A1771	
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12	
13 Statutory employee <input type="checkbox"/>		14 Other		12b Code	
Retirement plan <input type="checkbox"/>				12c Code	
Third-party sick pay <input type="checkbox"/>				12d Code	
VA 30-461314041F-001		55,000.07		2,705.92	
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury -- IRS
39-1908647

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return		2020		OMB No. 1545-0008	
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18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

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Copy C For EMPLOYEE'S RECORDS (See Notice)		2020		OMB No. 1545-0008	
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