Copy B To Be Filed FEDERAL Tax Retu	d with Employee's ırn.	2020 OMB No. 1545-0008	Copy 2 To Be Fil City, or Local Inc	led With Emp	oloyee's State turn.	, 202 OME	!0 3 No. 1545-0008
a Employee's SSN	Wages, tips, other comp.	2 Federal income tax withheld	a Employee's SSN	1 Wages, tips, ot		2 Federal	income tax withheld
	1714.50	46.00			1714.50		46.00
002-32-2302 3	Social security wages 1714.50	4 Social security tax withheld 106.30	802-32-2302	3 Social security	wages 1714.50	4 Social s	security tax withheld
b Employer ID no. (EIN)	Medicare wages and tips	6 Medicare tax withheld	b Employer ID no. (EIN)	5 Medicare wage		6 Medica	re tax withheld
04-3825294	1714.50	24.86	04-3825294	3 Medicare wage	1714.50	• Medica	24.86
c Employer's name, addrese MOONSTONE F	ss, and ZIP code OOD ENTERPRISES	, LLC	c Employer's name, add MOONSTONE			, LLC	
1231 S. WAB	ASH AVE		1231 S. WA	ABASH AVI	Ξ		
CHICAGO	CHICAGO IL 60605			CHICAGO IL 60605			
d Control number			d Control number				
e Employee's name, addre MANJU KUMAR 2901 S KING CHICAGO	Ĭ	Suff. IL 60616	e Employee's name, ad MANJU KUMA 2901 S KIN CHICAGO	ARI	de	IL	Suff. 60616
7 Social security tips	8 Allocated tips	9	7 Social security tips	8 Allocat	ed tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benef	enefits 11 Nonqualified plans		12a Code See inst. for box 12	
I I	4 Other	12b Code	13	14 Other 1		12b Cc	ode
Statutory employee		12e Code	Statutory employee			12c Cc	.do
Retirement Plan		12C Code	Retirement Plan			120 00	oue
Third-party sick pay		12d Code	Third-party sick pay			12d Co	ode
IL 04-382529	94 000 171	4.50 84.87	IL 04-3825	294 000	171	4.50	84.87
15 State Employer's state	ID number 16 State wages, tip	os, etc. 17 State income tax	15 State Employer's state	e ID number	16 State wages, tip	s, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	18 Local wages, tips, etc	t. 19 Local ii	ncome tax	20 Locality	r name
Form W-2 Wage and Tax St This information is being furnished	 tatement d to the Internal Revenue Service.	Dept. of the Treasury - IRS	Form W-2 Wage and Tax	x Statement			Dept. of the Treasury - IRS

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

penalty of other sanction in				nu you ian to	report it.		
Copy C For EMPLOYEE'S RECORDS. 2020 (See Notice to Employees). OMB No. 1545-0008							
(See Notice to I			hor comp	OMB No. 1545-0008 2 Federal income tax withheld			
a Employee's SSN	' vvag	1 Wages, tips, other comp.					
		1714.50			46.00		
802-32-2302	3 Soc	3 Social security wages			4 Social security tax withheld		
b Employer ID no. (EIN)		1714.50		106.30			
5 M		Medicare wages and tips			6 Medicare tax withheld		
04-3825294			1714.50	24.86			
c Employer's name, address, and ZIP code MOONSTONE FOOD ENTERPRISES, LLC							
1231 S. WABASH AVE							
CHICAGO	CHICAGO IL 60605						
d Control number							
MANJU KUMARI 2901 S KING DRIVE CHICAGO IL 60616							
7 Social security tips		8 Allocated tips		9			
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12			
13 14 0		ther		12b Code			
Statutory employee							
Retirement Plan				12c Code			
netilelit Flati		12d Code		ode			
Third-party sick pay							
IL 04-3825294 00		000	171	4.50	84.87		
 15 State Employer's sta	ate ID nu	mber	16 State wages, tips, etc. 17 Sta		17 State income tax		
18 Local wages, tips, etc. 19 Local income tax 20 Locality name							
19 Local moges, ups, etc. 19 Local monte tax 29 Locality fidilie							

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Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. 2020 OMB No. 1545-0008							
a Employee's SSN	1 Wages, tips, other comp.			2 Federal income tax withheld			
a Employee's SSN	1714.50			46.00			
802-32-2302 3		3 Social security wages			4 Social security tax withheld		
b Employer ID no. (EIN)	1714.50			106.30			
b Employer ID No. (EIN)	5 Medicare wages and tips			6 Medicare tax withheld			
04-3825294			1714.50		24.86		
c Employer's name, address, and ZIP code MOONSTONE FOOD ENTERPRISES, LLC 1231 S. WABASH AVE							
CHICAGO IL 60605							
d Control number							
e Employee's name, address, and ZIP code Suff. MANJU KUMARI 2901 S KING DRIVE CHICAGO TIL 60616							
7 Social security tips 8 Allocated tips			ad tins	9	00010		
r oddiai dddairty apo		6 7 moodic	od tipo	ľ			
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12			
13	her		12b Code				
Statutory employee				12c Code			
Retirement Plan							
Third-party sick pay					ode		
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15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax							
18 Local wages, tips, etc	c.	19 Local ir	ocal income tax		20 Locality name		
Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS							