2020 W-2 and EARNINGS SUMMARY

Employee Reference Wage and Tax Statement

Copy C for employee's records.					
Control number	Dept.	Corp.	Employer	use only	
000389 RU/NJA			Α	70	

Employer's name, address, and ZIP code XTRACIT INC

9335 HARRIS CORNERS PKW ST 24 SUITE 240 CHARLOTTE, NC 28269

Batch #94551

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

SURYATEJA KANCHI 4914 EAGLE CREEK DRIVE CHARLOTTE, NC 28262

b	Employer's FED ID number 81-3518806	a Employee's SSA number XXX-XX-3285
1	Wages, tips, other comp.	2 Federal income tax withheld
	42393.80	6340.47
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
1/	Other	12b
'*	Other	12c
		12d
		13 Stat emp Ret. plan 3rd party sick pay
15	State Employer's state ID n	o. 16 State wages, tips, etc.
17	State income tax 2030.78	18 Local wages, tips, etc.
19	Local income tax	20 Locality name

Wages, tips, other comp 42393.80 6340.47 Social security wages Social security tax withheld Medicare wages and tips 6 Medicare tax withheld d Control number Employer use only 70 000389 RU/NJA Employer's name, address, and ZIP code

XTRACIT INC 9335 HARRIS CORNERS PKW ST 24 SUITE 240 CHARLOTTE, NC 28269

b	Employer's FED ID number 81-3518806	a Employee's SSA number XXX-XX-3285		
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		
e/f	e/f Employee's name, address and ZIP code			

SURYATEJA KANCHI 4914 EAGLE CREEK DRIVE CHARLOTTE, NC 28262

15	State	Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.
17	State	income tax 2030.78	18 Local wages, tips, etc.
19	Local	income tax	20 Locality name
		Fodoral Fili	ina Conv

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. 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 Medicare MO. State Wages, Wages Wages Box 3 of W-2 Box 5 of W-2 Box 16 of W-2 Box 1 of W-2 Gross Pay 42,393.80 42,393.80

Reported W-2 Wages

42,393.80

0.00

42,393.80 0.00

13,926.40 13,926.40

2. Employee Name and Address.

SURYATEJA KANCHI 4914 EAGLE CREEK DRIVE CHARLOTTE, NC 28262

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1	1 Wages, tips, other comp. 42393.80		2 Federal income tax withheld 6340.47			
3	Social s	ocial security wages		4 Social security tax withheld		
5	5 Medicare wages and tips		6 Medica	re tax withh	eld	
d	Control	number	Dept.	Corp.	Employer	use only
0.0	0389	RU/NJA			Α	70
c Employer's name, address, and ZIP code						

XTRACIT INC 9335 HARRIS CORNERS PKW ST 24 SUITE 240 CHARLOTTE, NC 28269

b	Employer's FED ID number 81-3518806	a Employee's SSA number XXX-XX-3285
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	and ZIP code

SURYATEJA KANCHI 4914 EAGLE CREEK DRIVE CHARLOTTE, NC 28262

15 S	State O	Employer's state ID no. 25141317	16	State	wages,	tips, etc. 13926.40
17 5	State	income tax	18	Local	wages,	tips, etc.
		609.00				
19 I	Local	income tax	20	Local	ity nam	е
1			l			

MO.State Reference Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return

1	Wages, tips, other comp. 42393.80		2 Federal income tax withheld 6340.47				
3	Social security wages		4	Social	security tax	withh	eld
5	Medicare wages and	d tips	6	Medica	re tax withh	eld	
d	Control number	Dept.		Corp.	Employer	use	only
00	0389 RU/NJA				Α		70
С	Employer's name, a XTRACIT 9335 HAR SUITE 240 CHARLOTT	INC RIS CO	OR	NERS		ST	24

b	Employer's FED ID number 81-3518806	a Employee's SSA number XXX-XX-3285
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 pa

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

SURYATEJA KANCHI 4914 EAGLE CREEK DRIVE CHARLOTTE, NC 28262

	and the second s
15 State Employer's state ID no. 25141317	16 State wages, tips, etc. 13926.40
17 State income tax	18 Local wages, tips, etc.
609.00	
19 Local income tax	20 Locality name
MO State Fil	ing Conv

Wage and Tax Statement

Copy 2 to be filed with employee's State Income Tax Return