

**Form W-2 Wage and Tax Statement 2020**

21001

Copy C, for employees records

d Control number 0408-J311 000003514-000001		Void	c Employer's name, address, and ZIP code WORKFORCE OUTSOURCE SERVICES 475 RIVERSIDE DRIVE SUITE 1350 NEW YORK NY 10115		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number 20-3684091		a Employee's social security number 689-82-1624			1 Wages, tips, other compensation 27834.35	2 Federal income tax withheld	
13 Statutory employee		Retirement plan	Third-party sick pay			3 Social security wages 27834.35	4 Social security tax withheld 1725.73
12 See Instrs. for Box 12		14 Other UI/HC/WD 118.98 DI 72.79 DI PP# 203-684-09		e Employee's name, address, and ZIP code AKSHITA IYENGAR 24 STEVENSON LANE CHESTERFIELD NJ 08515		5 Medicare wages and tips 27834.35	6 Medicare tax withheld 403.59
15 State NJ NJ		Employer's state ID No. 203-684-091/000 FLI	16 State wages, tips, etc. 27993.10	17 State income tax 44.79	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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.

**Form W-2 Wage and Tax Statement 2020**

Copy B, to be filed with employees FEDERAL tax return

d Control number 0408-J311 000003514-000001		Void	c Employer's name, address, and ZIP code WORKFORCE OUTSOURCE SERVICES 475 RIVERSIDE DRIVE SUITE 1350 NEW YORK NY 10115		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
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**Form W-2 Wage and Tax Statement 2020**

Copy 2, to be filed with employees tax return for NJ

d Control number 0408-J311 000003514-000001		Void	c Employer's name, address, and ZIP code WORKFORCE OUTSOURCE SERVICES 475 RIVERSIDE DRIVE SUITE 1350 NEW YORK NY 10115		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
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15 State NJ NJ		Employer's state ID No. 203-684-091/000 FLI	16 State wages, tips, etc. 27993.10	17 State income tax 44.79	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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**Form W-2 Wage and Tax Statement 2020**

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b Employer's identification number		a Employee's social security number			1 Wages, tips, other compensation	2 Federal income tax withheld	
13 Statutory employee		Retirement plan	Third-party sick pay			3 Social security wages	4 Social security tax withheld
12 See Instrs. for Box 12		14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
						7 Social security tips	8 Allocated tips
						10 Dependent care benefits	11 Nonqualified plans
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

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