FORM W-2 Wage and Tax Statement
Copy C For EMPLOYEE'S RECORDS (See notice on back of Copy 2)

Dept. of the Treasury • Internal Revenue Service
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 fall to report it.

Ith your Federal, State and Local Income Tax Returns.

| | I hes | se substitute vv-2 vorked in multiple | locations. | or had sev | eral forms o | f special c | or Illing ompens | ation, you | may receive m | ore than | one of these | e documents | | |
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| | | , | | | | | | ederal | Soc. Sec. | Me | dicare | | | |
| | 000 | | _ | | | | | Box 1 | Box 3 and 7 | | Box 5 94.45 | | | |
| The white copies of the W-2 forms are for your tax returns; the blue copy is for your records. Gross Wage Txbl Benefit: | | | | | | | 68 | 594.45 | 68594.45 | 600 | 34.43 | | | |
| General instructions, including an explanation Group Term Life | | | | | | , | | 61.54 | 61.54 | | 61.54 | | | |
| of the letter codes in box 12, are on the other side of the page. Adoption | | | | | | | | | | | | | | |
| Deferred Comp | | | | | | | (000.54) | | | | 32.54) | | | |
| To the right is an explanation of your W-2 Section 125 wages. Please note that the Gross amount Other Pretax/Wage Limit | | | | | | | (302.54) | | | (3.45) | | | | |
| may i | wages. Please note that the Gross amount Other Pretax/Mage Limit may include adjustments. W-2 Wages | | | | | | | 67673.45 | | | · · · · · · · | | | |
| | 1007107 * 77 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| D. CONTROL NUMBER This information is being furnished to the 2020 OMP NO 1545 - 000 | | | | | | | | 1. WAGES, TIPS, OTHER, COMPENSATION | | | | OME TAX WITHHELD | 10015 70 | |
| 00001 | 000015139501 Internal Revenue Service 2020 ONID NO. 1545 - 50 | | | | | | | 67673.45 | | | | 10245.79 | | |
| B. EMPLOYER DENTIFICATION NUMBER A EMPLOYER SOCIAL SECURITY NUMBER | | | | | | | 3. SOCIAL SECURITY WAGES | | | | | | | |
| C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE | | | | | | | | 5. MEDICARE WAGES AND TIPS | | | | 8. MEDICARE TAX WITHHELD | | |
| Savvas Learning Company LLC | | | | | | | 7. SOCIAL SECURITY TIPS | | | | 8. ALLOCATED TIPS | | | |
| | 15 E. Midland Ave Paramus NJ 07652 13. Statutory Referenced Third-Page Plan Skit Pr | | | | | | | y y | | | | 10. DEPENDENT CARE BENEFITS | | |
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| | ES FIRST NAME AND | | AST NAME | | | SUFF. | 11. NONG | QUALIFIED PLANS | 070000 | | 12 4-4 | С | 61.54 | |
| Amisha 801 N | a Federal stree | | hakkar | | | | 14 OTHER | | | | | DD | 7479.83 | |
| apt 10- | 48 | | | | | | | | | - 1 | | | | |
| USA | ler AZ 8 | | | | | | | | | | | | | |
| 15. STATE | EMPLOYERS | STATE I.D. NO. | 16. STATE WAG | | | E INCOME TAX | 05.45 | 18. LOCAL WA | GES, TIPS, ETC. | 19. LOCAL INC | COME TAX | 20. LOCAUTY | NAME | |
| AZ | 082460 | 6641 | | 67673 | 3.45 | 18 | 25.45 | | | 0 AND TO | AD ALONG | PERFORATION | , | |
| | | | and another than | | | | 1 WACES 1 | TIPS, OTHER, CO | | LD AND TE | 2 FEDERAL INC | OME TAX WITHHELD | | |
| | 15139501 | This information is being Internal Revenue Service | g furnished to the se | ON | ИВ NO. 1545 | - 0008 | | | 67 | 673.45 | | | 10245.79 | |
| & EMPLOYER IDENTIFICATION NUMBER A EMPLOYEE'S SOCIAL SECURITY NUMBER | | | | | | | | ECURITY WAGES | | | 4 SOCIAL SECU | RITY TAX WITHHELD | | |
| 82-4606641 807-23-8428 C. BURLOYER'S NAME ADDRESS, AND ZIP CODE | | | | | | | | E WAGES AND TH | P3 | | 6. MEDICARE TAX WITHHELD | | | |
| | | Company LLC | | | | - 1 | 2 80011 5 | ECURITY TIPS | | | 8. ALLOCATED T | IP\$ | | |
| 15 E. Midland Ave Paramus NJ 07652 | | | | | | | | ECORTT IIFS | | | | | | |
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| E. EMPLOYEE | S FIRST NAME AND | NITIAL LAS | TNAME | | | SUFF. | 11. NONQUA | LIFIED PLANS | | | 12. a-d | | 61.54 | |
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| Chandle USA | er AZ 852 | 226 | | | | | | | | | 13 Stehdoor | Retirement | Third-Party | |
| | ADDRESS AND ZIP | CODE | | | | | | | | 19. LOCAL INC | 13. Statutory Employee | Retrement Plan 20. LOCALITY | Third-Party Sick Pay | |
| 15. STATE AZ | 0824606 | | 16. STATE WAGE | S, TIPS, ETC. 67673 | | INCOME TAX | 25.45 | 18. LOCAL WAS | SES, TIPS, ETC. | 19. LOCALING | OME IAA | 20.1000.011 | TO THE | |
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| 82-460 C. EMPLOYER | S NAME, ADDRESS, | AND ZIP CODE | 007-2 | 3-0420 | | | 5. MEDICARE WAGES AND TIPS | | | | 6. MEDICARE TAX WITHHELD | | | |
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| Copy 2 To be | e filed with Em | ployee's STATE, CIT | Y or LOCAL | | | 2020 | 1 | | 100 | | Dept. of the T | reasury - Inter | nal Revenue Service | |
| ORM W- | 2 Wage a | and Tax Sta | tement | | | | _ | | FC | LD AND TE | EAR ALONG | PERFORATIO | N | |
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| W-2 AND WAGE SUMMARY | | | | | | | | | | | | | | |
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