FORM VV-2
FORM VV-2
COPY C For EMPLOYEE'S RECORDS (See notice on back of copy 2) 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.

For Example on you if this income is taxable and you fa imposed on you if the imposed on you if this income is taxable and you fa imposed on you if the imposed on all copies of your W-2 are on this page, separated the perforations. The white copies are for your tax by perforations for these forms, including an instructions for these forms, including an instruction of the letter codes used in box 12 are on the other side of the page. SUED STATEMENT 2020 OMB NO. 1545-0008 WAGES, TIPS, OTHER COMPENSATION A EMPLOYEE'S SOCIAL SECURITY NUMBER 1630900 FEDERAL INCO 18002.41 665-28-5975 2988.47 SOCIATED UNIVERSITIES INC 1400 16TH ST NORTH WEST MASHINGTON, DC 20036 ALLOCATED TIPS 10 DEPENDANT CARE BENEFIT LAST NAM SAHITHI ATTILI 310 SCHOOL OF MINES ROAD, APT 500.00 14 OTHE C 2.20 SOCORRO, NM 87801 DD LOYEE'S ADDRESS AND Z 2086.02 EMPLOYER'S STATE LD. NO 16 STATE WAGES, TIPS,ETC. 01788795000 MM 18 LOCAL WAGES, TIPS, ETC. 19 LOCAL INCOME TAX O LOCALITY NAME 18002.41 747.41 00179942 OMB NO. 1545-0008 18002.41 EMPLOYER IDENTIFICA 2988.47 11-1630900 665-28-5975 C. EMPLOYER'S NAME, ADDRESS AND ZIP CODE ASSOCIATED UNIVERSITIES INC ALLOCATED T 1400 16TH ST NORTH WEST WASHINGTON, DC 20036 REISSUED STATEMENT E. EMPLOYEE'S FIRST NAME AND INITIAL W 500.00 SAHITHI ATTILI 2.20 310 SCHOOL OF MINES ROAD, APT 14 OTHER DD 2086.02 T. B SOCORRO, NM 87801 Third-Party Sick pay EMPLOYER'S STATE LD. NO. 16 STATE WAGES, TIPS,ETC. 17 STATE INCOME TAX 18 LOCAL WAGES, TIPS, ETC. 01788795000 18002.41 747.41 Dept. of the Treasury - Internal Revenue Service Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return 2020 FOLD AND TEAR ALONG PERFORATION FORM W-2 Wage and Tax Statement NSATION OMB NO. 1545-0008 2988.47 00179942 18002.41 LEMPLOYER IDENTIFICATION 11-1630900 665-28-5975 EMPLOYER'S NAME, ADDRESS AND ZIP CODE ASSOCIATED UNIVERSITIES INC ALLOCATED TIPS STE 730 1400 16TH ST NORTH WEST 10 DEPENDANT CARE BENEFITS WASHINGTON, DC 20036 REISSUED STATEMENT 500.00 W LAST NAME 2.20 SAHITHI ATTILI DD 2086.02 OTHER 310 SCHOOL OF MINES ROAD, APT T. B SOCORRO, NM 87801 PLOYEE'S ADDRESS AND ZIPCODE 9 LOCAL INCOME TAX 20 LOCALITY NAME 18 LOCAL WAGES, TIPS, ETC. 15 STATE 16 STATE WAGES, TIPS,ETC. 747.41 MM 01788795000 18002.41 Dept. of the Treasury - Internal Revenue Service Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return 2020 FORM W-2 Wage and Tax Statement FOLD AND TEAR ALONG PERFORATION 00179942 WAGES, TIPS, OTHER COMPENSATION 2988.47 18002.41 OMB NO. 1545-0008 DEPLOYER DENTIFICATION TAX WITHHELD 11-1630900 A FMPLOYEE'S ROCKAL SECURITY MILLIABED C EMPLOYER'S HAME, ADDRESS AND ZIP CODE 665-28-5975 MEDICARE TAX WITHHELD

MEDICARE WAGES AND TIPS

Employee Reference Copy Wage and Tax Statement Copy C for employee's records. d Control number Dept. Corp. Employer use only A00767 NCN2/RFA 097453

c Employer's name, address, and ZIP code

QORVO US INC 7628 THORNDIKE RD GREENSBORO NC 27409-9421

Batch #01758

eff Employee's name, address, and ZIP code SAHITHI ATTILI 4001 1H EIGHT BELLES LN GREENSBORO NC 27410

Employer's FED ID number 95-3654013			a Employee's SSA number XXX-XX-5975					
1 Wages, tips	other comp. 29162.88	2 Federal income tax withheld 4572.26						
3 Social secu	rity wages	4	4 Social security tax withheld					
5 Medicare wa	ges and tips	6	6 Medicare tax withheld					
7 Social secu	ity tips	8	8 Allocated tips					
9	10 Dependent care benefits							
11 Nonqualified plans		12a See instructions for box 12 C 21 .00						
14 Other		12b 12c 12d 13 5	DDI	Ret. plar	1246 . 1814 3rd part	89		
15 State Emplo	yer's state ID no 20403	. 16 :	State w	ages, tip	29162	2.88		
17 State income				18 Local wages, tips, etc.				
9 Local income tax			20 Locality name					

2020 W-2 and EARNINGS SUMMARY

AP.

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 Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NC. State Wages, Tips, Etc. Box 16 of W-2	
Gross Pay Plus GTL (C-Box 12) Less 401(k) (D-Box 12) Less Other Cafe 125 Less Exempt Wages Reported W-2 Wages	30,562.22 21.00 1,246.18 174.16 N/A 29,162.88	30,562.22 21.00 N/A 174.16 30,409.06 0.00	30,562.22 21.00 N/A 174.16 30,409.06 0.00	30,562.22 21.00 1,246.18 174.16 N/A 29,162.88	

2. Employee Name and Address.

SAHITHI ATTILI 4001 1H EIGHT BELLES LN GREENSBORO NC 27410

O 2020 ADP, Inc.

Fold and Detach Here -