

a Employee's SSN 832-81-1193		b Employer identification number (EIN) 46-3088848			OMB No. 1545-0008	
c Employer's name, address, and ZIP code VITS CONSULTING CORP 3350 ANNAPOLIS LANE N SUITE A PLYMOUTH MN 55447		1 Wgs, tips, other compn 73237.00	2 Fed inc tax withheld 10196.00	3 Social security wages		
		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a		
e Employee's name, address, and ZIP code SHREYA MEHRA 10000 45TH AVE N PLYMOUTH MN 55442		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other	12b		
				12c		
				12d		
15 State MN	Employer's state ID number 3213474	16 State wages, tips, etc 73237.00	17 State income tax 4038.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/22/20 QBDT

Department of the Treasury — IRS

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

Copy B To Be Filed with Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.

a Employee's SSN 832-81-1193		b Employer identification number (EIN) 46-3088848			OMB No. 1545-0008	
c Employer's name, address, and ZIP code VITS CONSULTING CORP 3350 ANNAPOLIS LANE N SUITE A PLYMOUTH MN 55447		1 Wgs, tips, other compn 73237.00	2 Fed inc tax withheld 10196.00	3 Social security wages		
		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a		
e Employee's name, address, and ZIP code SHREYA MEHRA 10000 45TH AVE N PLYMOUTH MN 55442		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other	12b		
				12c		
				12d		
15 State MN	Employer's state ID No. 3213474	16 State wages, tips, etc 73237.00	17 State income tax 4038.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/22/20 QBDT

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

a Employee's SSN 832-81-1193		b Employer identification number (EIN) 46-3088848			OMB No. 1545-0008	
c Employer's name, address, and ZIP code VITS CONSULTING CORP 3350 ANNAPOLIS LANE N SUITE A PLYMOUTH MN 55447		This information is being furnished to the IRS. 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.				
		1 Wgs, tips, other compn 73237.00	2 Fed inc tax withheld 10196.00	3 Social security wages		
		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld		
d Control No.		7 Social security tips	8 Allocated tips	9		
e Employee's name, address, and ZIP code SHREYA MEHRA 10000 45TH AVE N PLYMOUTH MN 55442		10 Depdnt care benefits	11 Nonqualified plans	12a		
				12b		
				12c		
13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other			12d	
15 State MN	Employer's state ID No. 3213474	16 State wages, tips, etc 73237.00	17 State income tax 4038.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/22/20 QBDT

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

Copy C For EMPLOYEE'S RECORDS.
(See Notice to Employee.)