

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

c Employer's name, address, and ZIP code

US BANK NATIONAL ASSOC  
4000 W BROADWAY  
ROBBINSDALE MN 55422

e Employee's name, address, and ZIP code

CHETHAN GOUD BOMMAGANI  
1800 SHEPHERD CT, APT 112  
WAUKESHA WI 53186

7 Social security tips	1 Wages, tips, other compensation	2 Federal income tax withheld
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
10 Dependent care benefits	11 Nonqualified plans	12a
b Employer identification number (EIN) 31-0841368	14 Other	C 3.72
a Employee's social security number 681-66-4573		D 89.31
13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		W 130.00
		AA 357.26
15 State WI   0360000042255 06	16 State wages, tips, etc. 15329.75	17 State income tax 914.44
	18 Local wages, tips, etc.	19 Local income tax
		20 Locality name

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

Dept. of the Treasury - IRS

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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.

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Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B)

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