

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

OMB No. 1545-0008

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 DD 438.76
b Employer identification number (EIN) 31-0841368		14 Other	12b
a Employee's social security number 681-66-4573			12c
13 Statutory employee	Retirement plan	Third-party sick pay	12d
15 State		Employer's state ID number	16 State wages, tips, etc.
17 State income tax		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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