		Form W-2 OMB No. 1545-0008		Copy 2 — To Be Filed With State, City, or Local Incom		Form W-2 Wage and Tax Statement OMB No. 1545-0008			
2020	1 Wages, tips, other comp. 20180.97	2 Federal income 2604.		2020	1 Wages, tips, other 20180.9	er comp.	2 Federal i	income tax withhele	d
a Employee's SSN 645-25-8217	3 Social security wages 20402.33	4 Social security tax withheld 1264.94		a Employee's SSN 645-25-8217	3 Social security wages 20402.33		4 Social security tax withheld 1264.94		i
b Employer ID No. (EIN)	5 Medicare wages and tips	6 Medicare tax with	nheld	b Employer ID No. (EIN)	5 Medicare wages	and tips	6 Medicare	e tax withheld	
94-1687665 c Employer's name, address and BANK OF AMERICA, N 100 NORTH TRYON ST SUITE 170 CHARLOTTE, NC 2820	ATIONAL ASSOCIATION FREET	295.8 REISSUED STAT N		94-1687665 c Employer's name, address ar BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 28.	NATIONAL ASS STREET	R	REISSUED	295.83 D STATEMEN	Т
d Control number				d Control number					_
e — f Employee's name, address SRIKANTH P PANAGA 5500 MAGNOLIA RUN VIRGINIA BEACH, VA 2	NTI CIRCLE APT 1			e — f Employee's name, addre SRIKANTH P PANAG 5500 MAGNOLIA RU VIRGINIA BEACH, V	SANTI N CIRCLE APT 1				
7 Social security tips	8 Allocated tips	9		7 Social security tips	8 Allocated tips		9		
10 Dependent care benefits	Dependent care benefits 11 Nonqualified plans		for box 12 1.56	10 Dependent care benefits	11 Nonqualified plans		12a code See instr. for box 12		2
13 Statutory employee Retire	y 12b code D 22	21.36		Retirement plan Third-party sick		12b code D	221.36		
14 Other	12c code		14 Other			12c code			
15 State Employer's state ID no. VA 30-941687665F-001	16 State wages, tips, etc. 20180.97	17 State income ta	x 1061.13	15 State Employer's state ID no 30-941687665F-001	. 16 State wage:	s, tips, etc. 20180.97	17 State in	ncome tax 1061.13	3
18 Local wages, tips, etc. 19 Local income tax		20 Locality name		18 Local wages, tips, etc.	19 Local income tax 20 Locali		20 Locality	/ name	
This information is being furnished return, a negligence penalty or othe fail to report it. Copy C — For EMPLOYEE'S Notice to Employee on the	er sanction may be imposed on your sanction may be imposed on	If you are required to fil ou if this income is taxa Form W-2 and Tax Statement	e a tax ble and you OMB No. 1545-0008	Copy 2 — To Be Filed With State, City, or Local Incom			orm W-2	OMB No	
2020	1 Wages, tips, other comp. 20180.97	2 Federal income t	ax withheld	2020	1 Wages, tips, other	er comp.	2 Federal i	income tax withhele	
a Employee's SSN 645-25-8217	3 Social security wages 20402.33	4 Social security ta 1264.9		a Employee's SSN 645-25-8217	3 Social security was 20402.3	ages	4 Social security tax withheld 1264.94		
b Employer ID No. (EIN) 94-1687665	5 Medicare wages and tips 20402.33	6 Medicare tax withheld 295.83		b Employer ID No. (EIN) 94-1687665	5 Medicare wages and tips 20402.33		6 Medicare tax withheld 295.83		
c Employer's name, address and ZIP code REISSUED STATEMENT BANK OF AMERICA, NATIONAL ASSOCIATION 100 NORTH TRYON STREET SUITE 170 CHARLOTTE, NC 28202				c Employer's name, address and ZIP code REISSUED STATEMENT BANK OF AMERICA, NATIONAL ASSOCIATION 100 NORTH TRYON STREET SUITE 170 CHARLOTTE, NC 28202					
d Control number				d Control number					
e — f Employee's name, address SRIKANTH P PANAGA 5500 MAGNOLIA RUN VIRGINIA BEACH, VA 2	NTI CIRCLE APT 1			e — f Employee's name, addre SRIKANTH P PANAG 5500 MAGNOLIA RU VIRGINIA BEACH, V	SANTI N CIRCLE APT 1				
7 Social security tips	8 Allocated tips	9		7 Social security tips	8 Allocated tips		9		
10 Dependent care benefits	11 Nonqualified plans		for box 12 1.56	10 Dependent care benefits	11 Nonqualified pla	ans	12a code S	See instr. for box 1.4.56	2
13 Statutory employee Retire	y 12b code D 22	21.36	13 Statutory employee Retin	rement plan Third-p	arty sick pay	12b code D	221.36		
14 Other		12c code		14 Other			12c code		
15 State Employer's state ID no. 30-941687665F-001	16 State wages, tips, etc. 20180.97	17 State income tax 1061.13		15 State Employer's state ID no VA 30-941687665F-001	. 16 State wage	State wages, tips, etc. 20180.97		17 State income tax 1061.13	
18 Local wages, tips, etc. 19 Local income tax		20 Locality name		18 Local wages, tips, etc.	19 Local incom	19 Local income tax		20 Locality name	

This information is being furnished to the Internal Revenue Service.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying raining size. Workers willout cliniter round quality for a strainer credit. To dark any quality in children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your copies of Form W-2c from your employer for all corrections made so you may file them social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than \$8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

(See also Instructions for Employee on the back of Copy B.)

Instructions for Employee (See also Notice to Employee, on the back of adjacent Copy 2.)

- Box 1. Enter this amount on the wages line of your tax return.
- Box 2. Enter this amount on the federal income tax withheld line of your tax return.
- **Box 5.** You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete
- Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.
- Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.
 You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with

your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax reurn. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that box 3 and/or 3 in it is a pinot year deterial under a nonqualined or section 437(b) plant trait became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

(Continued below on the back of Copy 2.)

Instructions for Employee (continued from back of Copy B)

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former

employees only). See the Instructions for Forms 1040 and 1040-SR. **P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

(Continued on the back of Copy C.)

Instructions for Employee (continued from back of adjacent Copy 2)

Q-Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and

Long-Term Care Insurance Contracts.

S-Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption

Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social

security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Deferrals under a section 409A nonqualified deferred compensation plan
 Income under a nonqualified deferred compensation plan that fails to satisfy section 409A.

This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan **BB**—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable. **EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount

does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement
GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax, Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.