

Form W-2 Wage and Tax Statement 2020

21001

d Control number 0079-A8617059 000000234-		Void	c Employer's name, address, and ZIP code TRANZEAL INC 2107 N 1ST STREET SUITE #500 SAN JOSE CA 95131		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer's identification number 27-5500506		a Employer's social security number 062-65-3569		1 Wages, tips, other compensation 111571.76		2 Federal income tax withheld 13208.61
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages 111571.76		4 Social security tax withheld 6917.45
12 See Instrs. for Box 12		14 Other CASDI 1115.77		e Employee's name, address, and ZIP code SAZZAD HOSSAIN 1255 LINCOLN ST. 13 1255 LINCOLN ST. 13 SANTA CLARA CA 95050		5 Medicare wages and tips 111571.76
15 State CA		Employer's state ID No. 006-6230-4	16 State wages, tips, etc. 111571.76	17 State income tax 8935.98	18 Local wages, tips, etc.	19 Local income tax
					10 Dependent care benefits	11 Nonqualified plans
					6 Medicare tax withheld 1617.79	7 Social security tips
					8 Allocated tips	

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.

Copy B, to be filed with employees FEDERAL tax return

Form W-2 Wage and Tax Statement 2020

d Control number 0079-A8617059 000000234-		Void	c Employer's name, address, and ZIP code TRANZEAL INC 2107 N 1ST STREET SUITE #500 SAN JOSE CA 95131		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer's identification number 27-5500506		a Employer's social security number 062-65-3569		1 Wages, tips, other compensation 111571.76		2 Federal income tax withheld 13208.61
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages 111571.76		4 Social security tax withheld 6917.45
12 See Instrs. for Box 12		14 Other CASDI 1115.77		e Employee's name, address, and ZIP code SAZZAD HOSSAIN 1255 LINCOLN ST. 13 1255 LINCOLN ST. 13 SANTA CLARA CA 95050		5 Medicare wages and tips 111571.76
15 State CA		Employer's state ID No. 006-6230-4	16 State wages, tips, etc. 111571.76	17 State income tax 8935.98	18 Local wages, tips, etc.	19 Local income tax
					10 Dependent care benefits	11 Nonqualified plans
					6 Medicare tax withheld 1617.79	7 Social security tips
					8 Allocated tips	

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.

Copy 2, to be filed with employees tax return for CA

Form W-2 Wage and Tax Statement 2020

d Control number 0079-A8617059 000000234-		Void	c Employer's name, address, and ZIP code TRANZEAL INC 2107 N 1ST STREET SUITE #500 SAN JOSE CA 95131		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer's identification number 27-5500506		a Employer's social security number 062-65-3569		1 Wages, tips, other compensation 111571.76		2 Federal income tax withheld 13208.61
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages 111571.76		4 Social security tax withheld 6917.45
12 See Instrs. for Box 12		14 Other CASDI 1115.77		e Employee's name, address, and ZIP code SAZZAD HOSSAIN 1255 LINCOLN ST. 13 1255 LINCOLN ST. 13 SANTA CLARA CA 95050		5 Medicare wages and tips 111571.76
15 State CA		Employer's state ID No. 006-6230-4	16 State wages, tips, etc. 111571.76	17 State income tax 8935.98	18 Local wages, tips, etc.	19 Local income tax
					10 Dependent care benefits	11 Nonqualified plans
					6 Medicare tax withheld 1617.79	7 Social security tips
					8 Allocated tips	

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.

Copy 3, to be filed with employees tax return for CA

Form W-2 Wage and Tax Statement 2020

d Control number		Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer's identification number		a Employer's social security number		1 Wages, tips, other compensation		2 Federal income tax withheld
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages		4 Social security tax withheld
12 See Instrs. for Box 12		14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips
15 State		Employer's state ID No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
						10 Dependent care benefits
						11 Nonqualified plans
						6 Medicare tax withheld
						7 Social security tips
						8 Allocated tips

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.