

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		7 Social security tips	1 Wages, tips, other compensation 91515.30	2 Federal income tax withheld 14945.43		
e Employee's name, address, and ZIP code NAGARJUNA REDDY BHEMANADHAM 625 CAMELLIA CT. APT-2107 HAYWARD CA 94544		8 Allocated tips	3 Social security wages 91790.10	4 Social security tax withheld 5690.99		
		9	5 Medicare wages and tips 91790.10	6 Medicare tax withheld 1330.96		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 32.98		
15 State Employer's state ID number CA 450-2283-7		16 State wages, tips, etc. 91515.30	17 State income tax 6527.85	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy B-To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.
OMB No. 1545-0008

Dept. of the Treasury - IRS
Visit the IRS website at www.irs.gov/efile.

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.

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		7 Social security tips	1 Wages, tips, other compensation 91515.30	2 Federal income tax withheld 14945.43		
e Employee's name, address, and ZIP code NAGARJUNA REDDY BHEMANADHAM 625 CAMELLIA CT. APT-2107 HAYWARD CA 94544		8 Allocated tips	3 Social security wages 91790.10	4 Social security tax withheld 5690.99		
		9	5 Medicare wages and tips 91790.10	6 Medicare tax withheld 1330.96		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 32.98		
15 State Employer's state ID number CA 450-2283-7		16 State wages, tips, etc. 91515.30	17 State income tax 6527.85	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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

OMB No. 1545-0008

Dept. of the Treasury - IRS
Visit the IRS website at www.irs.gov/efile.

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		7 Social security tips	1 Wages, tips, other compensation 91515.30	2 Federal income tax withheld 14945.43		
e Employee's name, address, and ZIP code NAGARJUNA REDDY BHEMANADHAM 625 CAMELLIA CT. APT-2107 HAYWARD CA 94544		8 Allocated tips	3 Social security wages 91790.10	4 Social security tax withheld 5690.99		
		9	5 Medicare wages and tips 91790.10	6 Medicare tax withheld 1330.96		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 32.98		
15 State Employer's state ID number CA 450-2283-7		16 State wages, tips, etc. 91515.30	17 State income tax 6527.85	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

OMB No. 1545-0008

Dept. of the Treasury - IRS

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		7 Social security tips	1 Wages, tips, other compensation 91515.30	2 Federal income tax withheld 14945.43		
e Employee's name, address, and ZIP code NAGARJUNA REDDY BHEMANADHAM 625 CAMELLIA CT. APT-2107 HAYWARD CA 94544		8 Allocated tips	3 Social security wages 91790.10	4 Social security tax withheld 5690.99		
		9	5 Medicare wages and tips 91790.10	6 Medicare tax withheld 1330.96		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 32.98		
15 State Employer's state ID number CA 450-2283-7		16 State wages, tips, etc. 91515.30	17 State income tax 6527.85	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

OMB No. 1545-0008

Dept. of the Treasury - IRS