| Copy B - For Employee's Federal Income Tax Return 2020 OMB No. 1545-0008 | | | | | | | Copy 2 - For Employee's State Income Tax Return | | | | | |
|--|---------------------------------------|---------------------------------|----------------|---|------|--------------------------------|---|---|---|-------------------------|--|--|
| a Employee's social security number | | s, tips, other comp. 59092.4 | :0 | | 0.20 | security number | | 1 Wages, tips, other comp. 59092.4 | | | | |
| 148-59-6252 b Employer ID number | 3 Social | security wages 62726.9 | | cial security tax withheld 388 | 9.07 | | | 3 Social security wages 62726.98 | | | | |
| 26-1691118 | 18 5 Medicare wages and tips 62726.98 | | | 6 Medicare tax withheld 9 0 9 . 5 3 | | | 26-1691118 | | 5 Medicare wages and tips 6 2 7 2 6 . 9 8 | | | |
| cEmployer's name, address, Tango Managen 9797 Rombauer Suite 450 Dallas, TX 75 | ment Co | | | | | Tar 979 Sui | ngo M 97 Ro .te 4 | me, address, and 2 Janagemen Imbauer R 50 TX 7501 | t Consu d | lting | | |
| d Control number 11720 259 | | | | | | d Contr 117 | ol numbe 720 2 | 59 | | | | |
| e Employee's name, address Bindiganavile 9818 N MacArt Irving, TX 75 | Archa hur Bl | ana Ananthi | ram | | | Bir 981 | diga .8 N | me, address, and navile A MacArthu TX 7506 | rchana r Blvd | Ananthram # 1004 | | |
| 7 Social security tips 8 | | Allocated tips | | 9 Advance EIC payment | | 7 Social security tips | | tips | 8 Allocated tips | | | |
| 10 Dependent care benefits 1 | | 11 Nonqualified plans | | | | 10 Dependent care benefits | | are benefits | 11 Nonqualified plans | | | |
| ^{12a} D | | | utory employee | ee Retirement plan 3rd-party sick pay X | | 12a | D | | 3634.58 | _ | | |
| DD 2278. | | 8 . 17 14 Othe | er | | | DD 12c | | | 2278.17 14 Othe | | | |
| 12d | | | | | | 12d | | | | | | |
| N/A | | N/A | | N/A | | TX | NOT | NEEDED | | 59092.4 | | |
| 15 State Employer's State ID# | | 16 State wages, tips, etc. | | 17 State income tax | | 15 State Employer's State ID# | | | 16 State wages, tips, etc. | | | |
| 18 Local wages, tips, etc. N / A | | 19 Local income tax N/A | | 20 Locality name N/A | | 18 Local wages, tips, etc. N/A | | | 19 Loc | 19 Local income tax N/A | | |

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

OMB No. 1545-0008 2020 [TX] or comp. 8000.20 ages 2726.98 3889.07 and tips 2726.98 909.53 ing nanthram 1004 9 Advance EIC payment l plans 13 Statutory employee Retirement plan 3rd-party sick pay Х 59092.40 17 State income tax 20 Locality name ages, tips, etc. N/A N/A Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS

| Сору | C - F | OR EMP | | | CORDS ON | LY | 2020 | OMB No. 1545-0008 | | |
|-------------------------------------|-----------------|--|-------------------------|----------------------|--|--------------------------------|------------------------------------|----------------------|-------------------|--|
| a Employee's social security number | | 1 Wage | es, tips, other 59 (| comp. 092.40 | 2 Federal income tax withheld 8000.20 | | | | | |
| 148-59-6252 | | | 3 Socia | al security wag | | 4 Social security tax withheld | | | | |
| b Employer ID number | | | 62' | 726.98 | 3889.07 6 Medicare tax withheld 909.53 | | | | | |
| 26-1691118 | | | 5 Medio | care wages ar 62' | | | | | nd tips 726.98 | |
| c Employ | yer's nam | ne, address, and | d ZIP co | de | | | | | | |
| 979 Sui | 7 Roi te 4 | anageme mbauer : 50 TX 750 | Rd | onsult | ing | | | | | |
| d Contro 117 | l number 202 | 59 | | | | | | | | |
| Bin 981 | diga: 8 N | ne, address, ar navile MacArth TX 750 | Arch ur B | ana An | anthram 1004 | | | | | |
| 7 Social security tips | | | 8 Allocated tips | | | 9 Advance EIC payment | | | | |
| 10 Dependent care benefits | | | 11 | Nonqualified | plans | | | | | |
| 12a 12b | D | | 363 | 34.58 | 13 Statutory emp | loyee R | Retirement plan 3rd-party sick pay | | | |
| 120 | DD 22 | | 227 | 78.17 | 14 Other | | | | | |
| 12c | | | | | | | | | | |
| 12d | | | | | | | | | | |
| TX | NOT | NEEDED | | | 59092.40 | | | | | |
| 15 State Employer's State ID# | | | | | ges, tips, etc. | 17 State income tax | | | | |
| 18 Local wages, tips, etc. | | | | 19 Local inc | ome tax | 20 Locality name | | | | |
| N/A | | | |] | N/A | | N/A | | | |

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS