2020 W-2 and EARNINGS SUMMARY

Social Security

Medicare



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only 000160 RJ/W46

Employer's name, address, and ZIP code SOFTTHINK SOLUTIONS 560 HERNDON PKWY

HERNDON, VA 20170

Batch #91812

e/f Employee's name, address, and ZIP code

HARI S MUKKA 11539 HUEBNER ROAD APT # 3327 SAN ANTONIO, TX 78230

Employer's FED ID number a Employee's SSA number 20-0065202 XXX-XX-7944 Wages, tips, other comp Federal income tax withheld 94680.00 14945.55 Social security wages Social security tax withheld 96400.00 5976.80 Medicare wages and tips 6 Medicare tax withheld 96400.00 1397.80 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 1720.00 12b 14 Other 13 Stat emp. Ret. plan 3rd party sick pay 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 20 Locality name

Wages, tips, other 94680.00 14945.55 Social security wages 96400.00 Social security tax withheld 5976.80 Medicare wages and tips 96400.00 Medicare tax withheld 1397.80 Control number Dept. Employer use only 000160 RJ/W46 Employer's name, address, and ZIP code

SOFTTHINK SOLUTIONS 560 HERNDON PKWY **STE 100A** HERNDON, VA 20170

b	Employer's FED ID number 20-0065202		yee's SS XXX-X	A number X-7944			
7	Social security tips	8 Allocat	ted tips				
9		10 Depend	dent care	benefits			
11	Nonqualified plans	12a See ii D	nstruction	s for box 12 1720.00			
14	Other	12b					
		12c					
		12d					
		13 Stat em	p.Ret. plan	3rd party sick pay			
e/f	e/f Employee's name, address and ZIP code						

HARI S MUKKA 11539 HUEBNER ROAD APT # 3327 SAN ANTONIO, TX 78230

15	State	Employer's	state ID	no. 1	16 State wages, tips, etc.
17	State	income tax		1	18 Local wages, tips, etc.
19	Local	income tax		- 2	20 Locality name

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

Wages, Tips, other

Compensation Wages Wages Box 3 of W-2 Box 1 of W-2 Box 5 of W-2 96,400.00 96,400.00 96,400.00 Gross Pav **Less** 401(k) (D-Box 12) 1,720.00 N/A N/A Reported W-2 Wages 96,400.00 96,400.00 94,680.00

2. Employee Name and Address.

HARI S MUKKA 11539 HUEBNER ROAD APT # 3327 SAN ANTONIO, TX 78230

© 2020 ADP, Inc.

1 Wages, tips, other comp. 94680.00	2 Federal income tax withheld 14945.55				
3 Social security wages 96400.00	4 Social security tax withheld 5976.80				
5 Medicare wages and tips 96400.00	6 Medicare tax withheld 1397.80				
d Control number Dept.	Corp. Employer use only				
000160 RJ/W46	A 24				

SOFTTHINK SOLUTIONS INC 560 HERNDON PKWY **STE 100A** HERNDON, VA 20170

b	Employer's FED ID number 20-0065202	a Emplo	a Employee's SSA number XXX-XX-7944					
7	Social security tips	8 Allocated tips						
9		10 Deper	ndent care benefits					
11	Nonqualified plans	12a D	1720.00					
14	Other	12b	l					
		12c	1					
		12d	1					
		13 Stat en	np. Ret. plan 3rd party sick pay					

e/f Employee's name, address and ZIP code

HARI S MUKKA 11539 HUEBNER ROAD APT # 3327 SAN ANTONIO, TX 78230

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			20	Local	ity nam	е	

State Reference Wage and Tax Statement

Copy 2 to be filed with employee's State Income Tax Return

1	Wages,	tips, other c		2	Federal	income tax	
		9468	80.00			14	945.55
3	Social s	ecurity wage	es 00.00	4	Social	security tax	withheld 976.80
5	Medicar	wages and 9640	tips 00.00	6	Medica	re tax withhe	ald 397.80
d	Control	number	Dept.		Corp.	Employer	use only
00	0160	RJ/W46				Α	24

c Employer's name, address, and ZIP code SOFTTHINK SOLUTIONS INC 560 HERNDON PKWY **STE 100A** HERNDON, VA 20170

b	Employer's FED ID number	a Emp	love	e's SSA	number	
	20-0065202	a Employee's SSA number XXX-XX-7944				
7	Social security tips	8 Allocated tips				
9		10 Dep	ende	nt care	benefits	
11	Nonqualified plans	^{12a} D	1	1	720.00)
14	Other	12b	i			
		12c	Ť			
		12d	i			
		13 Stat	emp.	Ret. plan	3rd party s	ick

e/f Employee's name, address and ZIP code

HARI S MUKKA 11539 HUEBNER ROAD APT # 3327 SAN ANTONIO, TX 78230

ı						
	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		20	Locality name

or Local Reference Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return