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 do not 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 innour 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 credit is based on income and family size.

Workers without châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the HEI fir your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an intante at a penal institution. For 2020 income limits and more information, vist www. ris. gov/EITC.

Also see 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.

Also see Pub. 390, named informe cream. Full factors and a finite factor 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 employer to correct your employer to the correct way and the state of the correct way and any statement, with the Social Security Administration (SSA) to correct any Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSR, or money amount error reported to the SSA on Form W-2. Be use to get your copies of Form W-2 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 social security card, you should ask for a new card that displays your correct annear 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 S8.537.40 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 archive for the excess fave your federal income tax. If you had more than ore than 65.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the excess against your federal more than 65.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the structures for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

- 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 8999, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

 Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips show in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abor \$200.000.

\$200.00.

Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on Box 8. This amount is not included in boxes 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 fife 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 your received a smaller amount. If you have records that your received a smaller amount of tips your received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to your received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to You Forms 1040 and 1040-SR for how to deduct.

CONV.C. for amount your seconds and your aming in a particular year.

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

K—20% excise tax on excess golden parachute payments. See the instructions for forms 1040 and 1040-SR.

K—20% excise tax on excess gol

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. R. F. and S) and designated Roth contributions (codes A. B. Ba and ED) under all plans are generally limited to a total of \$91,500 (15),300 if you only have SIMPLE plans; \$22,500 for section 40(8) plans if you qualify for the 15-year rule explained in \$7,000. Horizan kinder code Har emited to \$7,000. Deferrals under code Gar en limited to \$10,500. Deferrals under code Har emited to \$7,000. Horizan kinder in \$7,000. Horizan kinder code Har emited to \$7,000. Horizan kinder in \$7,000. Horizan kinder Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 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.

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

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

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—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—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to

compute any taxable and nontaxable amounts.

Complete Form 8839, Qualified Adoption Expense compute any taxable and nontaxable amounts.

C—lincome 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.

requarements.

W—Emphyer 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)

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—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 1040-954.

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 403(b) 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.

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

PF—Permitted benefits under a qualified small employer health resubursement arrangement
GC—Income from qualified equity grants under section 83(i) elections as of the calcular year
HH—Accontributions you may deduct. See Pub. 690-A. Contributions to Individual Retirement
Arrangements (RAs).
BOX 14. Employers may use this box to report information such a state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the ckergy's parsonage allowance and utilities.
Raifroad empbyers use this box to report railroad retirement (RRTA) compensation. Tier 1 tax, Ter 2 tax, Medicare tax, Include tips reported by the employer to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copt C of Form NY-C for at least 3 years after the due date for filing your income tax

Form W-2 Wage and T	Γax Statement
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2020

Copy C, for employee's records

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 immosed on you if this income is taxable and you fail to report it.

									Illay be imposed	on you if this income is taxable and you f		
d Control number Void 0020-19049102 000CAS0043-				Void		s name, address, and ZIP code ACE SOLUTIONS INC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
	ver's identification			social security nu				0.17				
				•	·····	50 CRA	GWOOD ROAD SUITE	217	1 Wages, tips, other compensation	2 Federal Income tax withheld		
	365314			19-4112	-	SOUTH	I PLAINFIELD NJ 07080)	82140.33	8033.80		
13 Sta Emp	ltutory oloyee	plan	rement	Third-party sick pay					3 Social Security wages	4 Social Security tax withheld		
								82140.33	5092.70			
12 See I	12 See Instrs. for Box 12 14 Other				e Employee	's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld			
									82140.33	1191.03		
						MADH	U BABU ERLA		7 Social Security tips	8 Allocated Tips		
						2255 W	GERMANN RD					
						APT #2	8008		10 Dependent care benefits	11 Nonqualified plans		
						CHANI	DLER AZ 85286					
						CIIIIII	SEEK NE 03200		Verification Code			
15 State	Employe	r's state	I.D. No.	16 State wages,	tips, etc.		17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
ΑZ	4543653	314			75	207.00	2030.60					
MN	3360518	3			6	933.33	417.36					

Form W-2 Wage and Tax Statement

2020

2020

Copy B, to be filed with employee's FEDERAL tax return

	0020-19049102 000CAS0043- C				Void	c Employer's name, address, and ZIP code CODE ACE SOLUTIONS INC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
45-4.					50 CRAGWOOD ROAD SUITE 217 SOUTH PLAINFIELD NJ 07080				1 Wages, tips, other compensation 82140.33 2 Federal Income tax withheld 82140.33 4 Social Security wages 82140.33 50						
12 See Instrs. for Box 12 14			1 Other			MADH 2255 W APT #2	's name, address, and ZIP code U BABU ERLA ' GERMANN RD 008 DLER AZ 85286		7 Socia	82140.33 I Security tips endent care benefits	6 Medicare tax withheld 8 Allocated Tips 11 Nonqualified plans	1191.03			
15 State AZ MN	4543653 3360513		D. No.	16 State wages,	75	5207.00 5933.33	17 State income tax 2030.60 417.36		•	19 Local income tax	20 Locality name				

Form W-2 Wage and Tax Statement

Copy 2, to be filed with employee's tax return for AZ

d Control	l number				Void	c Employer	s name, address, and ZI	P code		Departs	nent of the Treasu	ırv - Internal Reven	ua Sarvica	
0020-19049102 000CAS0043-			CODE ACE SOLUTIONS INC					OMB No. 1545-0008						
b Employ	er's identificat	tion numb	er a Employe	s social security nu	mber	50 CR A	GWOOD RO	AD SHITE	217					
45-43	365314		753	-19-4112						1 Wage:	s, tips, other com		2 Federal Income tax with	
	utory	Reti	rement	Third-party		SOUTH	I PLAINFIEL	D NJ 07080	0			82140.33		8033.80
Empl		plar		sick pay						3 Social	Security wages		4 Social Security tax with	
												82140.33		5092.70
12 See Instrs. for Box 12 14 Other			•		e Employee	's name, address, and ZI	IP code		5 Medic	are wages and tip	s	6 Medicare tax withheld		
												82140.33		1191.03
				MADHU BABU ERLA					Security tips		8 Allocated Tips			
				2255 W GERMANN RD										
						APT #2008 CHANDLER AZ 85286				10 Depe	endent care benef	its	11 Nonqualified plans	
						CHAN	JLEK AZ 032	.00		Verif	ication Code			
15 State Employer's state I.D. No. 16 State wage			16 State wages	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local incom	e tax	20 Locality name		
ΑZ	454365	314			7:	5207.00		2030.60						

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 do not 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 (ECL) vom may be able to take the BEC for 2000 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size.

Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can this take the EUC if your investment income is more than the specified amount for 2020 or if moome is earned for services provided while you were an intained at a penal institution. For 2020 in come limits and more information, vist we wis zeyovETTC.

Also see 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.

Asso see Pub. 396, galmed income Creati. Any Ert, mar is more man your tax manury is returned 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 correct reported to the SAs on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct to that early the same as shown on your 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 wise the SSA websic are wown.SSA, gov.

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

Credit for excess taxes. If you had more than one employer in 2020 and more than SS, 537.40 in social security and/or Ter 1 rairoad retirement (RRTA) taxes were withheld, you may be able to chim a credit for the excess against your federal more than (S). The arrangement of the control of the con Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Instructions for Employee

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 8999. Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips show in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abov \$200,000.

Box 8. This amount is not included in the control of the

SOURCE Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report upon your tax return, see the instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax. on Lineported Tip Income, win your income tax return to report at least the allocated if parount unbess 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 empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess golden parachute payments. See the instructions for forms 1040 and 1040-SR.

K—20% excise tax on excess gol

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Betieve deferral (codes D, E, F, and S) and designated Roth contributions (codes AA, Ba, and EE) under all plans are generally limited to a total of \$19,500 (\$313,500 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 Har elimited 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 levit we 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. Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 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.

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

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—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—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

 $\label{eq:condition} \begin{array}{ll} 1) \\ T-- Adoption \ benefits \ (not \ included \ in \ box \ 1). \ Complete \ Form \ 8839, \ Qualified \ Adoption \ Expenses, \ to \end{array}$

W—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)

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—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 1040-954.

instructions for Forms 1040 and 1040-SR.

A.—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.

BE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under at accentral regular section 457(b) plan. This amount does not apply to contributions under a developed profit of the profit of t

withheld, unnon dues, uniform payments, neath insurance premiums deducted, nontaxable income, cleductional assistance payments, or a member of the Cergy'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.

Form W-2 Wage and Tax Statement

2020

Copy 2, to be filed with employee's tax return for MN

d Control number Void					c Employer's name,	address, and ZIP code						
					CODE ACE	SOLUTIONS INC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number a Employee's social security numb 45-4365314 753-19-4112 13 Statutory Retirement Third-party		mber		OOD ROAD SUITE AINFIELD NJ 07080	-	1 Wages, tips, other compensation 82140.33						
Employee								3 Social Security wages 82140.33	4 Social Security tax withheld 5092.70			
12 See Instrs. for Box 12	14	Other			MADHU BA	RMANN RD		5 Medicare wages and tips 82140.33 7 Social Security tips 10 Dependent care benefits Verification Code	6 Medicare tax withheld 1191.02 8 Allocated Tips 11 Nonqualified plans			
MN State Employe 3360518	n's state I.D	. No.	16 State wages		5933.33	State income tax 417.36	18 Local wages, tips, etc.	19 Local income tax	20 Locality name			

Form W-2 Wage and Tax Statement 2020

d Control number		Voi 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	r a Employee's soo	cial security number				1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Retirement Third-party Employee plan sick pay						3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12 14 Other			e Employee	o's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
						7 Social Security tips	8 Allocated Tips		
						10 Dependent care benefits	11 Nonqualified plans		
						Verification Code			
5 State Employer's state	.D. No. 1	16 State wages, tips,	etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2020

d Control in	number			X	C Employers	name, address, and 21F code				ment of the Treasury - Internal Reve o. 1545-0008	nue Servi	ce
b Employer	er's identification nu	mber a Employee	's social security nur	nber				l				
13 Statut			-						1 Wage	s, tips, other compensation	2 Fed	leral Income tax withheld
Employ	pyee p	Retirement Third-party plan sick pay						3 Socia	l Security wages	4 Soc	cial Security tax withheld	
12 See Inst	strs. for Box 12	14 Other			e Employee's	name, address, and ZIP code			5 Medi	care wages and tips	6 Med	dicare tax withheld
									7 Socia	l Security tips	8 Allo	ocated Tips
									10 Dep	endent care benefits	11 No	onqualified plans
									Veri	lication Code		
15 State	Employer's s	ate I.D. No.	16 State wages,	tips, etc.		17 State income tax	18	B Local wages, tips, etc.		19 Local income tax		20 Locality name