## 2020 W-2 and EARNINGS SUMMARY



Employee Reference
W-2 Wage and Tax
Statement
Copy C for employee srecords.

Copy C for employee srecords.

 d
 Control number
 Dept.
 Corp.

 000336
 RX/7KG

Corp. Employer use only 203

Employer's name, address, and ZIP code

I3INFOTEK INC 379 THORNALL ST 9TH FL EDISON, NJ 08837

Batch #90365

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

NAVEEN TAKKALA 1357 NEWPORT STREET MUNDELEIN, IL 60060

b	Emplo	yer's FED ID num 47-4371102	ber	а	Emplo		ee's SSA number
1	Wages	s, tips, other comp	э.	2	Feder	al	income tax withheld
		15840.	.00				2013.93
3	Social	security wages		4	Socia	l s	security tax withheld
5	Medic	are wages and tip	s	6	Medic	are	e tax withheld
7	Social	security tips		8	Alloca	ite	d tips
9				10	Depen	de	nt care benefits
11	Nonqu	alified plans	L			str 	uctions for box 12
14	Other			121		<u> </u>	
1	•			120		_	
				120		<u> </u>	
				13	Stat er	np.	Ret. plan 3rd party sick pay
ı		Employer's state 47-4371102	ID no. 000	16	State	wa	nges, tips, etc. 15840.00
17	State	income tax 784.	08	18	Local	w	ages, tips, etc.
19	Local	income tax		20	Locali	ity	name

1 Wages, tips, other comp.
15840.00
2 Federal income tax withheld
2013.93
3 Social security wages
4 Social security tax withheld
5 Medicare wages and tips
6 Medicare tax withheld
d Control number
000336 RX/7KG
Dept. Corp. Employer use only
203
c Employer's name, address, and ZIP code

I3INFOTEK INC 379 THORNALL ST 9TH FL EDISON, NJ 08837

b	Employer's FED ID number 47-4371102	a Employee's SSA number XXX-XX-9414					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a See instructions for box 12					
14	Other	12b					
		12c					
		12d					
		13 Stat emp Ret. plan 3rd party sick pay					
e/f	e/f Employee's name address and ZIP code						

en Employee's name, address and zir code

NAVEEN TAKKALA 1357 NEWPORT STREET MUNDELEIN, IL 60060

15 State	Employer's state ID no. 47-4371102 000	16 State wages, tips, etc. 15840.00
17 State	income tax <b>784.08</b>	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name
	Federal Fili	ina Copy

Federal Filing Copy

Wage and Tax 2020

Statement Copy B to be filed with employee's Federal Income Tax Return. 1545-0008

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 Wages Tips, Etc.

Box 1 of W-2 Box 3 of W-2 Box 5 of W-2 Box 16 of W-2

 Gross Pay
 15,840.00
 15,840.00
 15,840.00
 15,840.00

 Reported W-2
 Wages
 15,840.00
 0.00
 0.00
 15,840.00

2. Employee Name and Address.

NAVEEN TAKKALA 1357 NEWPORT STREET MUNDELEIN, IL 60060

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1 Wages, tips, other comp. 15840.00		2 Federal income tax withheld 2013.93						
3 Social security wages			4 Social security tax withheld					
5	Medicare wages and	d tips	6 Medica	re tax withl	neld			
d	Control number	Dept.	Corp.	Employer	use only			
0 0	0336 RX/7KG				203			
С	I3INFOTEK 379 THOR 9TH FL	INC		5				

b	Employer's FED ID number 47-4371102	a Employee's SSA number XXX-XX-9414					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a					
14	Other	12b					
		12c					
		12d					
		13 Stat emp. Ret. plan 3rd party sick pay					

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

NAVEEN TAKKALA 1357 NEWPORT STREET MUNDELEIN, IL 60060

15 State	Employer's state ID no. 47-4371102 000	16 State wages, tips, etc. 15840.00
17 State	income tax	18 Local wages, tips, etc.
	784.08	
19 Local	income tax	20 Locality name
	IL.State Refe	erence Copy
<b>W</b>	<b></b> Wage ar	

Statement

1	1 Wages, tips, other comp. 15840.00			2 Federal income tax withheld 2013.93					
3	Social security wage	4 Social security tax withheld							
5	Medicare wages and	6 Medicare tax withheld							
d	Control number	Dept.	Corp	.	Employ	/er	use only		
00	0336 RX/7KG						203		
С	Employer's name, a	ddress, ar	nd ZIP c	ode					
b	9TH FL EDISON, Employer's FED ID 47-437110	number			e's SSA XX-XX				
7	Social security tips		8 Allo		tips	<u>-9</u>	414		
9			10 Depe	ndei	nt care	ber	efits		
11	Nonqualified plans		12a	1					
14	Other		12b	<u> </u>					
			12c	i					
			12d	i					
			13 Stat	emp.	Ret. plan	3rd	party sick pay		

NAVEEN TAKKALA 1357 NEWPORT STREET MUNDELEIN, IL 60060

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

| 15 | State | Employer's state ID no. | 16 | State wages, tips, etc. | 15840.00 | | 17 | State income tax | 18 | Local wages, tips, etc. | 19 | Local income tax | 20 | Locality name | 11 | State | Eiling | Copy | 19 | Cop

IL.State Filing Copy
Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax
Return

× 2020