Form W-2	Vag	ge and Ta	ax (Statement
Copy C - For EMPLO	YEE	- E'S RECORI	DS	2020
This information is being furnished to the to file a tax return, a negligence penalty o imposed on you if this income is taxable a	IRS. I r othe	f you are required er sanction may be	Der	OMB No. 1545-0008 artment of Treasury -
Control ODO40 TO2		ou fail to report it.		rnal Revenue Service
number URO40 EU3 Employer's name, address, and ZIP code	I.	00113	, 	
EFICENS SYST	EM	IS LLC		
VERIDIC HOLD	IN	IGS LL	С	
		RINGS	F	YWY
		24		
Employee's name, address, and ZIP code MANI DEEPIKA		AJJAY	ΔN	r
4910 PONDLOO		DRIVE	<u> </u>	L
DUBLIN OH 43				
	-			
19745.0	0		2	404.27
1 Wages, tips, other comp		2 Federal in	ncor	ne tax withheld
3 Social security wages		4 Social security tax withheld		
5 Medicare wages and tips		6 Medicare tax withheld		
7 Social security tips		8 Allocated tips		
9		10 Dependent care benefits		
11 Nonqualified plans		12a		
		12b		
13 Statutory Retirement Third-part plan Sick pay	У	12c		
Employee's social security n		12d 14		
808 - 24 - 5869		14		
Employer ID number (EIN)				
84-3443670				
15 St. Employer's state ID number	16	State wages, tips		17 State income ta:
GA 3487627-DS		8000.		387.16
OH 54-131286			372.24	
18 Local wages, tips, etc.	19	Local income tax		20 Locality name

	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages and Tips
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
Gross Pay	\$19,745.00	\$19,745.00	\$19,745.00
Less: Non-Taxable Earnings	\$0.00	(\$19,745.00)	(\$19,745.00)
Less: Retirement Deductions	\$0.00	N/A	N/A
Less: Other Pre-tax Deductions	\$0.00	\$0.00	\$0.00
Less: Third Party Sick Pay	\$0.00	\$0.00	\$0.00
Less: Excess Wages	N/A	\$0.00	N/A
Total Reported Wages	\$19,745.00	\$0.00	\$0.00
Tax Withheld	Fed Income Box 2 of W-2 \$2,404.27	Social Security Box 4 of W-2	Medicare Box 6 of W-2

	GA State Wages, Tips, etc.	OH State Wages, Tips, etc.
	Box 16 of W-2	Box 16 of W-2
Gross Pay	\$8,000.00	\$11,745.00
Less: Non-Taxable Earnings	\$0.00	\$0.00
Less: Retirement Deductions	\$0.00	\$0.00
Less: Other Pre-tax Deductions	\$0.00	\$0.00
Less: Third Party Sick Pay	\$0.00	\$0.00
Total Reported Wages	\$8,000.00	\$11,745.00
	GA State Income Tax	OH State Income Tax
	Box 17 of W-2	Box 17 of W-2
Tax Withheld	\$387.16	\$372.24

MANI DEEPIKA KAJJAYAM 4910 PONDLOOP DRIVE DUBLIN, OH 43016

The Form W-2 Box 1 wages are the Gross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus any additional compensation received after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, etc.

			ax	Statement
Copy 2 — To Be Filed				2020
Employee's State, City, or	Loc	cal	Der	OMB No. 1545-0008 partment of Treasury
Income Tax Return.		00110	Inte	ernal Revenue Service
number 0RO40 E03		00119	,	
Employer's name, address, and ZIP code EFICENS SYST				
VERIDIC HOLD			a	
			-	121.137
5400 LAUREL	-		P	'KWY
SUWANEE GA 3		24		
Employee's name, address, and ZIP code MANI DEEPIKA		7 T T 7 V	71 T.	r
4910 PONDLOO			AI•	L
DUBLIN OH 43	υ⊥	0		
19745.0	•			404.27
1 Wages, tips, other comp		2 Federal in	ncor	ne tax withheld
3 Social security wages		4 Social se	ecur	ity tax withhel
5 Medicare wages and tips		6 Medicare tax withheld		
7 Social security tips		8 Allocated tips		
		10 Dependent care benefits		
9		10 Depend	ent	care benefits
11 Nongualified plans		12a		
I Nonqualitieu plans		12a 12b		
13 Statutory Retirement Third-part	v			
13 Statutory Retirement Third-part plan sick pay	,	12c		
		12d		
Employee's social security n 808-24-5869	0.	14		
Employer ID number (EIN)				
84-3443670				
15 St. Employer's state ID number	16	State wages, tips		17 State income t
GA 3487627-DS		8000.0	-	387.16
OH 54-131286		L1745.C	0	372.24
18 Local wages, tips, etc.	19	Local income tax		20 Locality name
	1			

Form W-2 Wage and Tax Statement			
Copy 2 — To Be Filed With 2020			
Employee's State, City, or Local OMB No. 1545-0008 Income Tax Return. Department of Treasury - Internal Returns Service			
Control 0RO40 E03K 00119			
Employer's name, address, and ZIP code			
EFICENS SYSTEMS LLC			
VERIDIC HOLDINGS LLC			
5400 LAUREL SPRINGS PKWY SUWANEE GA 30024			
Employee's name, address, and ZIP code			
MANI DEEPIKA KAJJAYAM			
4910 PONDLOOP DRIVE			
DUBLIN OH 43016			
19745.00 2404.27 Wages, tips, other comp. 2 Federal income tax withheld			
3 Social security wages 4 Social security tax withheld			
5 Medicare wages and tips 6 Medicare tax withheld			
7 Social security tips 8 Allocated tips			
9 10 Dependent care benefits			
11 Nonqualified plans 12a			
12b			
13 Statutory Retirement Third-party sick pay 12c			
12d			
Employee's social security no. 14 808-24-5869			
Employer ID number (EIN)	S		
84-3443670	PVW9		
15 St. Employer's state ID number 16 State wages, tips, etc. 17 State income tax			
GA 3487627-DS 8000.00 387.16	C		
OH 54-131286 11745.00 372.24			
18 Local wages, tips, etc. 19 Local income tax 20 Locality name	717		
	282		

NTF 2583714

Form W-2 Wage and Tax Statement				
Copy B — To Be Filed V	With	2020		
Employee's FEDERAL Tax	Return.	OMB No. 1545-0008		
This information is being furnished to the I	IRS.	Department of Treasury - Internal Revenue Service		
number 0R040 E031	K 0011	9		
Employer's name, address, and ZIP code	_			
	EFICENS SYSTEMS LLC			
VERIDIC HOLDINGS LLC				
5400 LAUREL S	SPRINGS	S PKWY		
SUWANEE GA 3	0024			
Employee's name, address, and ZIP code				
MANI DEEPIKA				
4910 PONDLOOD		1		
DUBLIN OH 430	016			
19745.0	0	2404.27		
 Wages, tips, other comp. 	2 Federal	income tax withheld		
 Social security wages 	4 Social s	security tax withheld		
5 Medicare wages and tips		6 Medicare tax withheld		
7 Social security tips	8 Allocate	8 Allocated tips		
9	10 Depend	lent care benefits		
	10	1		
11 Nonqualified plans	12a			
13 Statutory Retirement Third-party	12b			
13 Statutory Retirement Third-party plan Sick pay	120			
	12d			
Employee's social security no 808-24-5869	o. 14			
Employer ID number (EIN) 84-3443670				
15 St. Employer's state ID number	16 State wages, tip:	s, etc. 17 State income tax		
GA 3487627-DS	8000.00 387.10			
OH 54-131286	11745.00 372.24			
18 Local wages, tips, etc.	19 Local income tax	K 20 Locality name		

2020 W-2 and Earnings Summary

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. You may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit. Earned income 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 the 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't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. See also 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.

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 error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c 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 name 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 \$8,537.40 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 one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions 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 8959, 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 shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.
Box 8. This amount is not included in box 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 file 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 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 employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

(Instructions for Employee continued on back of Copy 2.)

Instructions for Employee (Continued from back of Copy B.)

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

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, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 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 H are limited 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 elective 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.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

V-Income from exercise of nonstatutory stock

Nontaxable Income, for reporting requirements.

on Form 8889, Health Savings Accounts (HSAs)

Y-Deferrals under a section 409A nonqualified

to an additional 20% tax plus interest. See the

compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject

AA—Designated Roth contributions under a section 401(k) plan

BB-Designated Roth contributions under a section

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount

Z-Income under a nonqualified deferred

Instructions for Forms 1040 and 1040-SR.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report

option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and

B-Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

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

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) taxexempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J-Nontaxable sick pay (information only, not included in box 1, 3, or 5)

 $K{-}20\%$ excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

(Instructions for Employee continued on back of Copy C.)

Instructions for Employee (Continued

from back of Copy 2.)

Box 12. (continued)

L-Substantiated employee business expense reimbursements (nontaxable)

M-Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N-Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

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

 ${\bf Q-}Nontaxable$ combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

 ${\rm R-Employer}$ contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction 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.

benses, unts. does not apply to contributions under a tax-exempt organization section 457(b) plan. FF – Permitted benefits under a qualified small employer health reimbursement arrangement

403(b) plan

deferred compensation plan

GG—Income from qualified equity grants under section 83(i)

 $\ensuremath{\textbf{HH}}\xspace - \ensuremath{\textbf{Aggregate}}\xspace$ deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy'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.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.