Copy B — To Be Filed With Employee's FEDERAL Tax Return. 41-0852411 OMB No. 1545-0008 a Employee's soc. sec. no. Wages, tips, other comp 45657.15 4877.79 115-79-8852 45657.15 2830.74 **b** Employer ID number (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 46-4381195 45657.15 662.03 c Employer's name, address, and ZIP code Impact Outsourcing Solutions IX LLC 300 WILSON RD BLDG 800 GRIFFIN, GA 30224 **d** Control number e Employee's name, address, and ZIP code SAIS MEKALA 701 CENTER RIDGE DR APT 621 Austin, TX 78753 7 Social security tips 0.00 0.00 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst. for box 12 13 Statutory employee 14 Other 12c Code Retirement plan Third-party sick pay 12d Code 15 State Employer's state ID number 18 Local wages, tips, etc. 16 State wages, tips, etc 19 Local income tax 17 State income tax 20 Locality name Dept. of the Treasury -- IRS Form W-2 Wage and Tax Statement

This information is being furnished to the Internal Revenue Service. www.irs.gov/efile

Copy 2 – To Be Filed State, City, or Local 1			41-0852411 OMB No. 1545-0008
Employee's soc. sec. no.	1 Wages, tips, other co	mp.	2 Federal income tax withheld
115-79-8852	3 Social security wages	45657.15	4877.7  4 Social security tax withheld
Employer ID number (EIN)	3 Social security wages	45657.15	2830.7
46-4381195	5 Medicare wages and	tips 45657.15	6 Medicare tax withheld 662.0
Employer's name, address,	and ZIP code		
Impact Outsourcin	g Solutions IX LLC		
300 WILSON RD	BLDG 800		
GRIFFIN, GA 3022	24		
Control number			
701 CENTER RID Austin, TX 78753 Social security tips	GE DR APT 621		9
	0.00	0.00	9
<b>0</b> Dependent care benefits	11 Nonqualified p	ans	12a Code
3 Statutory employee	14 Other		12b Code
Retirement plan			12c Code
Third-party sick pay	-		12d Code
E State Employar's state 1.5	number 16 State M	vages, tips, etc.	17 State income tax
5 State Employer's state I.I. 8 Local wages, tips, etc.	19 Local income t		20 Locality name
orm W-2 Wage and Tax S	Statement	2020	Dept. of the Treasury

Totace to Employee Cit a		
Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld
115-79-8852	45657.1	
	3 Social security wages 45657.1	4 Social security tax withheld 2830.74
Employer ID number (EIN)		
46-4381195	5 Medicare wages and tips 45657.1	6 Medicare tax withheld 662.03
Employer's name, address, ar	nd ZIP code	
Impact Outsourcing	Solutions IX LLC	
300 WILSON RD B		
GRIFFIN, GA 3022	4	
Control number		
Employee's name, address, a	nd ZIP code	Suff.
SAI S MEKALA		
701 CENTER RIDG	SE DR APT 621	
Austin, TX 78753		
Social security tips	8 Allocated tips	9
0.0	0.0	
Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
3 Statutory employee 1	4 Other	<b>12b</b> Code
Retirement plan		12c Code
Third a set wiele a sec		
Third-party sick pay		12d Code
15 State Employer's state I.D.	number 16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name
arm M. O.Mana and Tay State		Dont of the Treesury IDC
orm W-2 Wage and Tax State his information is being furnish	ement 2020 ned to the IRS. If you are required to file a	Dept. of the Treasury IRS a tax return, a negligence
	e imposed on you if this income is taxable	

Copy C - For EMPLOYEE'S RECORDS (See

a Employee's soc. sec. no.	1 Wag	ges, tips, other comp.	2 Federal income tax withheld				
115-79-8852		45657.15	4877.7	'9			
113-79-0032	3 Soc	cial security wages	4 Social security tax withheld				
<b>b</b> Employer ID number (EIN)		45657.15	2830.7	<b>'</b> 4			
40 4004405	<b>5</b> Me	dicare wages and tips	6 Medicare tax withheld				
46-4381195		45657.15	662.0	)3			
c Employer's name, address, a	nd ZIP c	ode					
Impact Outsourcing	Solu	tions IX LLC					
300 WILSON RD BLDG 800							
GRIFFIN, GA 3022	4						
d Control number							
e Employee's name, address,	and ZIP	code	Si	uff.			
SAI S MEKALA							
701 CENTER RIDG	E DR	APT 621					
Austin, TX 78753							
7 Social security tips		8 Allocated tips	9				
0.0	00	0.00					
10 Dependent care benefits		11 Nonqualified plans	12a Code				
13 Statutory employee	14 Other		12b Code				
Retirement plan			12c Code				
Third-party sick pay			12d Code				
15 State Employer's state I.D.	number	16 State wages, tips, etc.	17 State income tax				
18 Local wages, tips, etc.		19 Local income tax	20 Locality name				
Form W 2 Wags and Tay State		2020	Dept of the Treasury	IDS			

Copy 2 - To Be Filed With Employee's State,

City, or Local Income Tax Return.

41-0852411

OMB No. 1545-0008

41-0852411

OMB No. 1545-0008

## 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 don't 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

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. 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.

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-2c. 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 also may 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

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 also may be able to claim a credit. See the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax..

(Also see Instructions for Employee, below.)

## Instructions for Employee

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 an 1040-SR to determine if you are required to complete Form 8959 Box 6. This amount includes the 1.45% Medicare Tax withheld or 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

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For 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 (104) 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 big amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if if is more or less than the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security record (used to figure your benefits, 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 (cafeleria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 24141. Child and \$5,000 also is 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 nonqualfiled 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 should not 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 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 (\$19.500 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 C 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 emplo However, if you were at teast age 50 in 2020, your employer r have allowed an additional deferral of up to \$6,500 (\$3,000 fo 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.

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.

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

D—Elective deferrais 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 deferrais under a section 403(b) salary reduction series.

F—Elective deferrais and employer contributions (including nonelective deferrais) to a section 457(b) deferred compensation plan.

plan.

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SF 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.

L-Substantiated employee business expense reimbursements

(nontaxable).

M—Uncollected social security or RRTA tax on taxable cost of group-tern 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).

Q—Nontaxable combat pay. See the Instructions for Forms 1040

Q—Montaxable 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 Gare Insurance Contracts. S—Employee salary reduction contributions under a section 408(p) SIMPE Ep Jain (not included in box 1). S—Employee salary reduction contributions under a section 408(p) SIMPE Ep Jain (not included in box 1). T—Adoption benefits (not included in box 1). Complete Form 8839, Challed Light Contributions of the Contribution of the Contribut

Qualified Adoption Expenses, to compute any taxable and

ontaxable amounts.

V—Income 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. W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to y health savings account. Report on Form 8889, Health Saving Accounts (HSAs).

Y-Deferrals under a section 409A nonqualified deferred

Y—Deferrals under a section 409A nonqualified deferred compensation plan onqualified he deferred compensation plan that Tails to satisfy section 409A. This amount also is 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 401(k) plan. BB—Designated Roth contributions under a section 402(b) plan.

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

EE—Designated Poth code:

reported with code DD is not taxable.

EE—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. The section 457(b) plan. The FE—Permitted benefits under a qualified small employer health reimbursement arrangement.

GG—Income from qualified equity grants under section 83(i). HH—Aggregate 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 poply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

See Pub. 590-A, Controlutions to Individual reterement 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. Ter 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.

Included in Box 14, if applicable, are amounts paid to you as qualified sick leave wages or qualified family leave wages under the Families First Coronavirus Response Act. Specifically, up to three types of paid qualified sick leave wages or qualified family leave wages are reported in Box 14.

·Sick leave wages subject to the \$511 per day limit because of care \*Sick neare wages subject to the \$211 per day limit because of care you required.
 \*Sick leave wages subject to the \$200 per day limit because of care you provided to another; and
 \*Emergency family leave wages.

If you have self-employment income in addition to wages paid by your employer, and you intend to claim any qualified sick leave or qualified family leave equivalent credits, you must report the qualified family leave equivalent credits, you must report the qualified sick leave or qualified family leave wages on form 7202. Credits for Sick Leave and Family Leave for Certain Self-Employed Individuals, included with your income tax return and reduce (but not below zero) any qualified sick leave or qualified family leave equivalent credits by the amount of these qualified leave wages. If you have self-employment income, you should refer to the instructions for your individual income tax return for more information.

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.