This PDF is Generated for W-2s for below Selection Criteria

System: PRD

Run By: BUCHTM01

Run Date: 02/02/2021

Run Time: 15:20:17

Report Name: EW2\_BUCHTM01\_20210202152017

Year: 2020

Both Hourly and Salaried employees are included

Terminated Employees are included

| Personnel# |
|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| 01393602   |            |            |            |            |            |            |            |            |

1 Wages, tips, other compensation	2 Federal Income tax withheld	1 Wages, tips, other compensation	2 Federal Income tax withheld		
909.46	1.29	909.46	1.29		
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld		
a Employee's SSA number	Employer use only	a Employee's SSA number	Employer use only		
717-64-5525		717-64-5525			
b Employer's FED ID number 56-1874931	d Control number 01393602	b Employer's FED ID number 56-1874931	d Control number 01393602		
c Employer's name, address, and ZIP code	01393002	c Employer's name, address, and ZIP code	01393002		
Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217		Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED S	STATEMENT	REISSUED S	STATEMENT		
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits	9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a See instructions for box 12		
13 Statuton, Potiroment Third Porty		12 Statutony Batiroment Third Party			
13 Statutory Retirement Third-Party Sick pay	12b	13 Statutory Retirement Third-Party Sick pay	12b		
14.00	402		40-		
14 Other	12c	14 Other	12c		
	12d		12d		
e Employee's first name and initial Last nam REVANTH KUMAR REDDY 4 VILLAGE DR APT 9 CAPE GIRARDEAU MO 63	' ARRABOTHU	e Employee's first name and initial Last name Suff.  REVANTH KUMAR REDDY ARRABOTHU  4 VILLAGE DR APT 9  CAPE GIRARDEAU MO 63701			
f Employee's address and ZIP code	I 19 Local wagon tipe ato	f Employee's address and ZIP code	L19 Local wages, tips, etc.		
15 State Employer's state ID 15553248	18 Local wages, tips, etc	15 State Employer's state ID 15553248	18 Local wages, tips, etc		
16 State wages, tips, etc. 909.46	19 Local income tax	16 State wages, tips, etc. 909.46	19 Local income tax		
17 State income tax	20 Locality name	17 State income tax	20 Locality name		
Form OMB. No. 1545-0008		Form OMB. No. 1545-0008	Dept. of the Treasury - Internal Revenue		
Copy C for Employee's records  1 Wages, tips, other compensation 909.46	Dept. of the Treasury - Internal Revenue Service: This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.  2 Federal Income tax withheld  1.29  4 Social security tax withheld	Copy 2 To Be Filed With Employee's STATE Income  1 Wages, tips, other compensation  909.46 3 Social security wages	2 Federal Income tax withheld  1.29 4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld		
a Employoo's SSA number	Employer use only	a Employee's SSA number	Employer use only		
a Employee's SSA number	Employer use only		Employer use only		
717-64-5525 b Employer's FED ID number	d Control number	717-64-5525 b Employer's FED ID number	d Control number		
56-1874931	01393602	56-1874931	01393602		
c Employer's name, address, and ZIP code  Compass Group USA, Inc. 2400 Yorkmont Rd  Charlotte NC 28217		c Employer's name, address, and ZIP code  Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED S	STATEMENT	REISSUED STATEMENT			
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits	9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a See instructions for box 12		
		· ·			
13 Statutory Retirement Third-Party Sick pay	12b	13 Statutory Retirement Third-Party Employee plan Sick pay	12b		
14 Other	12c	14 Other	12c		
	12d		12d		
e Employee's first name and initial Last nam REVANTH KUMAR REDDY 4 VILLAGE DR APT 9 CAPE GIRARDEAU MO 63	' ARRABOTHU	e Employee's first name and initial Last nam REVANTH KUMAR REDDY 4 VILLAGE DR APT 9 CAPE GIRARDEAU MO 63	' ARRABOTHU		
f Employee's address and ZIP code	18 Local wages, tips, etc	f Employee's address and ZIP code	18 Local wages, tips, etc		
15 State Employer's state ID 15553248		15 State Employer's state ID 15553248			
16 State wages, tips, etc. 909.46	19 Local income tax	16 State wages, tips, etc. 909.46	19 Local income tax		
17 State income tax	20 Locality name	17 State income tax	20 Locality name		
W-2 Wage and Tax 202 Statement Conv. B. To Be Filed With Employee's FEDERAL Tax		Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 202 Copy 2 To Be Filed With Employee's CITY or LOCAL			