

Form **W-2 Wage and Tax Statement 2020**

c Employer's name, address, and ZIP code INSURANCE SERVICES OFFICE, INC 545 WASHINGTON BOULEVARD JERSEY CITY NJ 07310		7 Social security tips	1 Wages, tips, other compensation 85151.94	2 Federal income tax withheld 13690.04	
e Employee's name, address, and ZIP code SIVA SHASHANK CHINTAPENTA 107 WAVERLY ST JERSEY CITY NJ 07306		8 Allocated tips	3 Social security wages	4 Social security tax withheld	
		9	5 Medicare wages and tips	6 Medicare tax withheld	
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 21.36	
13 Statutory employee Retirement plan Third-party sick pay b Employer identification number (EIN) 13-3131412 a Employee's social security number 357-79-4155		14 Other Medical 2185.20 Vision 72.48	12b DD 7863.12	12c	
			12d		
15 State NJ Employer's state ID number 133131412000	16 State wages, tips, etc. 87514.50	17 State income tax 3738.29	18 Local wages, tips, etc.	19 Local income tax 139.99	20 Locality name FLI

Copy B-To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS website at www.irs.gov/efile.

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

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