Form W-2 Wage and Tax Statement	2020		7 Social security tips		1 Wages, tips, other compensation		2 Federal income tax withheld		
c Employer's name, address, and ZIP code	oloyer's name, address, and ZIP code		8 Allocated tips		126343.24 3 Social security wages		13758.98 4 Social security tax withheld		
INSURANCE SERVICES OFFICE, INC			9		137700.00  5 Medicare wages and tips		8537.40		
545 WASHINGTON BOULEVARD JERSEY CITY NJ 07310					145312.59		2107.03		
			10 Dependent care benefits 2083.		11 Nonqualified plans		12a See instruc	96.42	
e Employee's name, address, and ZIP code			13 Statutory Retirement Third-par sick pay		14 Other		12b	18969.35	
BHASKAR DHONTHA			<b>b</b> Employer identification number (I	EIN)	Medical 655	7.04	12c		
17 GABRIEL DR			13-3131412  a Employee's social security number		HCRA 800.00 Vision 146.40		12d	23595.12	
MONTVILLE NJ 07045			323-08-5541		Transit 34.00		C od e		
15 State Employer's state ID number	16 State wages, tips, etc		17 State income tax	18 Loc	cal wages, tips, etc.	19 Local in	come tax	20 Locality name	
NJ 133131412000	33131412000 136341.99						215.84	215.84 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									
			7 Social security tips		ence penalty or other sanction may be imposed on y		you if this income is taxable and you fail to report it.  2 Federal income tax withheld		
Form W-2 Wage and Tax Statement	2020		, ,		126	343.24		13758.98	
c Employer's name, address, and ZIP code INSURANCE SERVICES OFFICE,	. INC		8 Allocated tips		3 Social security wages 137	700.00	4 Social security	tax withheld 8537.40	
545 WASHINGTON BOULEVARD			9		5 Medicare wages and tips		6 Medicare tax withheld		
JERSEY CITY NJ 07310			10 Dependent care benefits		145312.59 11 Nonqualified plans		2107.03		
e Employee's name, address, and ZIP code			2083.  13 Statutory Retirement Third-par sick pay	31 rty	14 Other		12b	96.42	
BHASKAR DHONTHA			X			7.04	e D	18969.35	
17 GABRIEL DR			<b>b</b> Employer identification number (I	EIN)	HCRA 800.	00	DD	23595.12	
MONTVILLE NJ 07045			a Employee's social security number		Vision 146.40		12d		
			323-08-5541		Transit 3	4.00	d		
<b>15</b> State Employer's state ID number NJ   133131412000	16 State wages, tips, etc 13634		17 State income tax 5322.72	<b>18</b> Loc	cal wages, tips, etc.	19 Local in	come tax 215.84	20 Locality name	
Copy C-For EMPLOYEE'S RECORDS (See	Notice to Employ	ee on t	ne back of Copy B.)	OME	B No. 1545-0008			e Treasury - IRS rebsite at www.irs.gov/efile	
							T =		
Form W-2 Wage and Tax Statement	2020		7 Social security tips		1 Wages, tips, other comp 126	ensation 343.24	2 Federal incom	13758.98	
c Employer's name, address, and ZIP code INSURANCE SERVICES OFFICE, INC			8 Allocated tips		3 Social security wages 137700.00		4 Social security tax withheld 8537.40		
INSURANCE SERVICES OFFICE, INC 545 WASHINGTON BOULEVARD JERSEY CITY NJ 07310			9 10 Dependent care benefits		5 Medicare wages and tips  145312.59  11 Nonqualified plans		6 Medicare tax withheld		
							12a	2107.03	
e Employee's name, address, and ZIP code			2083.  13 Statutory employee Petirement Third-par sick pay		14 Other		C 12b	96.42	
			×			7.04	<sup>c</sup> D	18969.35	
BHASKAR DHONTHA 17 GABRIEL DR			<b>b</b> Employer identification number (I	EIN)	HCRA 800.00		DD D	23595.12	
MONTVILLE NJ 07045			a Employee's social security numb	er		.40	12d		
			323-08-5541		Transit 3	4.00	d e		
<b>15</b> State Employer's state ID number NJ 133131412000	16 State wages, tips, etc. 136341		17 State income tax 5322.72	18 Loc	cal wages, tips, etc.	19 Local in	come tax 215.84	20 Locality name FLI	
Copy 2-To Be Filed With Employee's State	e, City, or Local I	ncome	Tax Return	OME	B No. 1545-0008		Dept. of th	e Treasury - IRS	
. W 2 Wags and Tay Statement	2020		7 Social security tips		1 Wages, tips, other comp		2 Federal incom	e tax withheld 13758.98	
Form W-2 Wage and Tax Statement			8 Allocated tips		126343.24  3 Social security wages		4 Social security tax withheld		
INSURANCE SERVICES OFFICE, INC			9		137700.00 <b>5</b> Medicare wages and tips		8537.40  6 Medicare tax withheld		
545 WASHINGTON BOULEVARD JERSEY CITY NJ 07310					145312.59		2107.03		
			10 Dependent care benefits 2083.31		11 Nonqualified plans		12a   C   96.42		
e Employee's name, address, and ZIP code			13 Statutory employee Retirement Third-part sick pay		14 Other		12b	18969.35	
BHASKAR DHONTHA			<b>b</b> Employer identification number (EIN)		Medical 6557.04		12c		
17 GABRIEL DR MONTVILLE NJ 07045			13-3131412  a Employee's social security number		HCRA 800.00 Vision 146.40		DD 12d	23595.12	
PONTVILLE NO 0/043			323-08-5541			4.00	Code		
15 State Employer's state ID number	16 State wages, tips, etc			18 Loc	cal wages, tips, etc.	19 Local in		20 Locality name	
NJ 133131412000	13634		5322.72				215.84	FLI	
Copy 2-To Be Filed With Employee's State	e, City, or Local I	ncome	Tax Return	OME	B No. 1545-0008	<u> </u>	Dept. of th	e Treasury - IRS	