2020 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax 2020							
Statem Statem Story C for employee's records.	OMB No. 1545-0008						
Control number Dept. 000038 RH/26H	Corp.	Employer use only A					
Employer's name, address, and ZIP code E-NEXUS INC 24520 MEADOWBROOK RD SUITE 250 NOVI, MI 48375 Batch #93064							
APT # 277 FREMONT, CA 94538	DR	le					
5 Employer's FED ID number 38-3562776		/ee's SSA number XXX-XX-1114					

Wages, tips, other comp

85600.00

8929.05

Federal income tax withheld

Social security wages 85600.00 5307.20 Medicare wages and tips 6 Medicare tax withheld 1241.20 85600.00 Social security tips 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 11 Nonqualified plans 12b 14 Other 856.00 SDI 13 Stat emp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, OA5-1331 3 tips, etc 85600.00 17 State income tax 18 Local wages, tips, etc. 5662.58 19 Local income tax 20 Locality name Wages, tips, other ther comp. 85600.00 8929.05 Social security wages 85600.00 tax withheld 5307.20 Medicare wages and tips 85600.00 tax withheld 1241.20 d Control number Dept

d Control numb	er Dept.	Corp.	Emplo	yer use only
000038 RH	/26H		A	
E-NEXU 24520 N	aame, address, a S INC MEADOWBROO MI 48375			0
b Employer's F	ED ID number 662776	a Emplo		A number X-1114
7 Social security		8 Allocated tips		
9			dent care	
11 Nonqualified	olans	12a See	instruction 	s for box 12
14 Other 856.00 SDI	12b			
	12c			
	12d			
		13 Stat em	p Ret. plan	3rd party sick pay
e/f Employee's n NARMADA 39517 GAL APT # 277 FREMONT,	TULASI LAUDET I CA 94538 er's state ID no	OR .		
	331 3	85600.00		
17 State income	5662.58	18 Local wages, tips, etc.		
19 Local income	tax	20 Locality name		
F	ederal Fi	ling C	Сору	
W-2 Copy B to be filed wi	Wage a	nd Ta	× 2	020 No. 1545-0008

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

Social Security CA. State Wages, Wages, Tips, other Medicare Compensation Wages Wages Tips, Etc. Box 5 of W-2 Box 16 of W-2 Box 1 of W-2 Box 3 of W-2

85,600.00 85,600.00 85,600.00 85,600.00 Gross Pav Reported W-2 Wages 85,600.00 85,600.00 85,600.00 85,600.00

2. Employee Name and Address.

NARMADA TULASI 39517 GALLAUDET APT # 277 DR FREMONT, CA 94538

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1 Wages, tips, other comp.	2 Federal income tax withheld			
85600.00	8929.05			
3 Social security wages 85600.00	4 Social security tax withheld 5307.20			
5 Medicare wages and tips 85600.00	6 Medicare tax withheld 1241.20			
d Control number Dept.	Corp. Employer use only			
000038 RH/26H	A			
c Employer's name, address, a	nd ZIP code			
E-NEXUS INC				
24520 MEADOWBROO	K RD SUITE 250			
NOVI, MI 48375				
b Employer's FED ID number	a Employee's SSA number			
38-3562776 7 Social security tips	XXX-XX-1114			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
·				
11 Nonqualified plans	12 a			
14 Other	12b			
14 Other	12c			
856.00 CA SDI	12d			
	13 Stat emp. Ret. plan 3rd party sick pay			
of Employee's name address	nd ZID ands			
e/f Employee's name, address and ZIP code				
NARMADA TULASI				
39517 GALLAUDET DR				
APT # 277				
FREMONT, CA 94538				
15 State Employer's state ID no 045-1331 3	. 16 State wages, tips, etc. 85600.00			
17 State income tax	18 Local wages, tips, etc.			
5662.58				
19 Local income tax	20 Locality name			
CA.State Reference Copy				
04000				

Wage and Tax

Statement

1 Wages, tips, other comp. 85600.00	2 Federal income tax withheld 8929.05					
3 Social security wages 85600.00	4 Social security tax withheld 5307.20					
5 Medicare wages and tips 85600.00	6 Medicare tax withheld 1241.20					
d Control number Dept. 000038 RH/26H	Corp. Employer use only					
c Employer's name, address, and ZIP code E-NEXUS INC 24520 MEADOWBROOK RD SUITE 250 NOVI, MI 48375						
b Employer's FED ID number 38-3562776	a Employee's SSA number					
7 Social security tips	8 Allocated tips					
9	10 Dependent care benefits					
11 Nonqualified plans	12a					
14 Other 856.00 CA SDI	12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay					
e/f Employee's name, address ar	nd ZIP code					
NARMADA TULASI 39517 GALLAUDET DR APT # 277 FREMONT, CA 94538						
15 State Employer's state ID no. 045-1331 3	16 State wages, tips, etc. 85600.00					
17 State income tax 5662.58	18 Local wages, tips, etc.					
19 Local income tax	20 Locality name					
CA.State Filing Copy Wage and Tax 2020						

Statement Copy 2 to be filed with employee's State Income Tax Return.