2020 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement Copy C for employee's records.

d Control number Corp. Employer use only K7/CAV

Employer's name, address, and ZIP code

MULTIEDGE INC 12100 FORD ROAD SUITE B280 FARMERS BRANCH, TX 75234

Batch #91936

e/f Employee's name, address, and ZIP code

CHANDRIKA THAMMA 10436 KENSINGTON **APT 3138**

COLLIERVILLE, TN 38017 Employer's FED ID number a Employee's SSA number 81-2784221 XXX-XX-9215 Wages, tips, other comp Federal income tax withheld 73383.75 5715.93 Social security wages Social security tax withheld 6600.00 409.20 Medicare wages and tips 6 Medicare tax withheld 6600.00 95.70 Social security tips 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 11 Nonqualified plans 12b 14 Other 13 Stat emp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

Wages, tips, other 73383.75 5715.93 Social security wages 6600.00 Social security tax 409.20 Medicare tax withheld 95.70 Medicare wages and tips 6600.00 Control number Employer use only 000038 K7/CAV Employer's name, address, and ZIP code

MULTIEDGE INC 12100 FORD ROAD SUITE B280 FARMERS BRANCH, TX 75234

b	Employer's FED ID number 81-2784221	a Employee's SSA number XXX-XX-9215					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a See instructions for box 12					
14	Other	12b					
		12c					
		12d					
		13 Stat emp Ret. plan 3rd party sick pay					
e/f	Employee's name, address ar	nd ZIP code					

CHANDRIKA THAMMA 10436 KENSINGTON CIR **APT 3138** COLLIERVILLE, TN 38017

					,				
15	State	Employer's	state	ID no.	16	State	wages,	tips,	etc.
		' '			1				
					\perp				
17	State	income tax			18	Local	wages,	tins.	etc.
		moonio tax			1		agoo,	upo,	0.0.
10	Local	income tax			20	Local	ity nam		
13	LUCAI	ilicollie tax			120	Local	ity mann	-	

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. 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.

Wages, Tips, other Compensation Box 1 of W-2

Social Security Wages Box 3 of W-2

Medicare Wages Box 5 of W-2

Gross Pav Reported W-2 Wages

73,383.75 73,383.75

73,383.75 6,600.00

73,383.75 6,600.00

2. Employee Name and Address.

CHANDRIKA THAMMA 10436 KENSINGTON CIR APT 3138 COLLIERVILLE, TN 38017

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1 Wages, tips, other comp. 73383.75	2 Federal income tax withheld 5715.93			
3 Social security wages 6600.00	4 Social security tax withheld 409.20			
5 Medicare wages and tips 6600.00	6 Medicare tax withheld 95.70			
d Control number Dept.	Corp. Employer use only			
000038 K7/CAV	21			

c Employer's name, address, and ZIP code

MULTIEDGE INC 12100 FORD ROAD SUITE B280 FARMERS BRANCH, TX 75234

b	Employer's FED ID number 81-2784221	a Employee's SSA number XXX-XX-9215				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a				
14	Other	12b				
		12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pay				

e/f Employee's name, address and ZIP code

CHANDRIKA THAMMA 10436 KENSINGTON CIR **APT 3138** COLLIERVILLE, TN 38017

ı							
	15	State	Employer's	state	ID no.	16	6 State wages, tips, etc.
ı							
ı	17	State	income tax			18	8 Local wages, tips, etc.
ı							= ' ' '
ı							
ı	10	Local	income tax			20	0 Locality name
ı	13	Locui	moonic tax			120	o Locality Haine
ı							

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

1 Wages, tips, other comp. 73383.75				Federa	income tax withheld 5715.93	
3 Social security wages 6600.00				4 Social security tax withheld 409.20		
5 Medicare wages and tips 6600.00				Medica	re tax withheld 95.70	
d	Control number	Dept.		Corp.	Employer use only	
0.0	00038 K7/CAV				21	

c Employer's name, address, and ZIP code

MULTIEDGE INC 12100 FORD ROAD SUITE B280 FARMERS BRANCH, TX 75234

b	Employer's FED ID number 81-2784221	a Employee's SSA number XXX-XX-9215					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a					
14	Other	12b					
		12c					
		12d					
		13 Stat emp. Ret. plan 3rd party sick pa					

e/f Employee's name, address and ZIP code

CHANDRIKA THAMMA 10436 KENSINGTON CIR **APT 3138** COLLIERVILLE, TN 38017

15	State	Employer's	state	ID	no.	16	State wages, tips, etc.
17	State	income tax				18	Local wages, tips, etc.
19	Local	income tax				20	Locality name

or Local Reference Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return