d Control number							d Control number				
e Employee's name, a PRAVEEN R 172 HAVER ANDOVER,	NEE	LAPU		218 MA	018	Suff. 310	PR. 17:	oyee's name, a AVEEN R 2 HAVER DOVER,	NEE	LAF	
7 Social security tips 8 Allocated tips 9							7 Social security tips 8 Alle				
10 Dependent care benefits 11 Nonqualified plans				12a C	12a Code See inst. for box 12			10 Dependent care benefits 11 No			
42	1 440	<u> </u>		425.0			13		1 440	lb.s.s	
13 Statutory employee MAPFML 255.19				)	12b Code			Statutory employee MAP			
Retirement Plan				12d C			Retiremen	nt Plan			
Third-party sick pay				1200			Third-part	y sick pay			
MA WTH-106	0013	8-003	6752	0.50		3168.42	MA	WTH-106	0013	8-01	
15 State Employer's	state ID r	number	16 State wages, tip	s, etc.	17 Sta	te income tax	15 State	Employer's sta	te ID nu	mber	
18 Local wages, tips, etc. 19 Local inc			ncome tax	20 Loca	20 Locality name			18 Local wages, tips, etc.			
Form W-2 Wage and T This information is being fun	orm W-2 Wage and Tax Statement Dept. of the Treasury - IR. is information is being furnished to the Internal Revenue Service.					of the Treasury - IRS	Form W	-2 Wage and Ta	ax State	ment	
a Employee's SSN 67520.50 076-81-3384 3 Social security wages 4			20 OM 2 Federa	2020   Copy 2 To I City, or Loc.					e Filed With E I Income Tax  1 Wages, tip  84 3 Social sect		
b Employer ID no. (EIN) 22-3786614				6 Medica	1161.07 Medicare tax withheld			oyer ID no. (EIN)	5 Med	dicare v	
c Employer's name, a			18726.90 de			271.54		3786614 lloyer's name, a RST TEK	ddress,	and ZI	
FIRST TER			TTE: 201					1 HOES			
371 HOES LANE, SUITE: 201											
PISCATAWAY NO d Control number					08	854	l L	SCATAWA	<u> </u>		
e Employee's name, PRAVEEN I 172 HAVEE ANDOVER, 7 Social security tips	NE)	ELAPU	EET UNIT		01	Suff. 810	PR 17 AN	oloyee's name, at AVEEN For AVEEN FOR AVEEN FOR AVER FOR A SECUTION AND A SECUTIO	NE	ELA:	
10 Dependent care be	nefits	11 Nonqu	alified plans	12a (	Code Se	ee inst. for box 12	10 Dep	endent care ber		11 No	
13         14 Other           Statutory employee         MAPFML         255.19			9	12b Code 12c Code			y employee		Other PFM		
Retirement Plan				12d Code			ent Plan				
Third-party sick pay					1		1	rty sick pay			
MA WTH-106	50013	88-003	6752	20.50		3168.42	MA	WTH-106	50013	38-0	
15 State Employer's st			16 State wages, ti	<del></del>		ate income tax	-	e Employer's st			
18 Local wages, tips,	etc.	19 Local	income tax	20 Loca	lity nam	е	18 Loc	al wages, tips, e	etc.	19 L	
Form W-2 Wage and	Tax State	ement			Dept.	of the Treasury - IRS	Form \	W-2 Wage and	Fax State	ement	

Copy B To Be Filed with Employee's FEDERAL Tax Return.

c Employer's name, address, and ZIP code FIRST TEK, INC

a Employee's SSN

076-81-3384

**b** Employer ID no. (EIN)

22-3786614

PISCATAWAY

1 Wages, tips, other comp.

5 Medicare wages and tips

3 Social security wages

371 HOES LANE, SUITE: 201

67520.50

18726.90

18726.90

**2020** OMB No. 1545-0008

2 Federal income tax withheld

4 Social security tax withheld

NJ 08854

6 Medicare tax withheld 271.54

5011.00

1161.07

				á				
Copy 2 To Be Fi	come	Tax Ret	urń.			No. 1545-0008		
a Employee's SSN	1 Wag	pes, tips, other comp. 67520.50			2 Federal income tax withheld 5011.00			
076-81-3384	3 Social security wages				4 Social security tax withheld 1161.07			
<b>b</b> Employer ID no. (EIN)	18726.90 5 Medicare wages and tips 18726.90			6 Medicare tax withheld 271.54				
22-3786614								
c Employer's name, ad FIRST TEK	dress, a , IN	nd ZIP cod C	е					
371 HOES	LANE	, SUI	TE: 201					
PISCATAWA	Y	N	NJ 08854					
d Control number								
e Employee's name, address, and ZIP code Suff.								
PRAVEEN R 172 HAVERI ANDOVER,			ET UNIT		B MA	01810		
7 Social security tips		8 Allocate	ed tips	9		2		
10 Dependent care bene	efits	11 Nonqua	lified plans	1	12a Code See inst. for box 12			
13 Statutory employee	14 Other MAPFML 255.1				12b Code			
	MAPEML 255.15			12c Code				
Retirement Plan Third-party sick pay				1	12d Code			
MA WTH-106	0013	8-003 67520			50	3168.42		
15 State Employer's state	te ID nu	mher	16 State wages, tij	ns et	r.	17 State income tax		
18 Local wages, tips, et				20 Locality name				
3, -, -,								
Form W-2 Wage and Ta	ay State	ment	****	<u> </u>		Dept. of the Treasury - IRS		
1 51111 VY-Z VVago and 16	Olulo	orit				Lope of the fredomy - free		

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. 2020 OMB No. 1545-0008 2 Federal income tax withheld 1 Wages, tips, other comp. a Employee's SSN 5011.00 67520.50 3 Social security wages tax withheld 076-81-3384 18726.90 1161.07 b Employer ID no. (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 18726.90 271.54 22-3786614 c Employer's name, address, and ZIP code FIRST TEK, INC 371 HOES LANE, SUITE: 201 NJ 08854 PISCATAWAY d Control number e Employee's name, address, and ZIP code Suff. PRAVEEN R NEELAPU 172 HAVERHILL STREET UNIT 218 01810 ANDOVER, MA 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst, for box 12 14 Other 12b Code Statutory employee MAPFML 255.19 12c Code Retirement Plan 12d Code Third-party sick pay 67520.50 3168.42 WTH-10600138-003

REV 12/22/20 QBDT

20 Locality name

16 State wages, tips, etc.

19 Local income tax

Dept. of the Treasury - IRS

17 State income tax

In order for the information on this form to be effectively keypunched, it must be read upright. Therefore, attach this W-2 to your state, city, or local tax return as follows:





NOTE: THIS W-2 IS ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE, AND LOCAL/CITY INCOME TAX RETURNS. Notice to Employee

Notice to Employee
Do you have to file? Refer to the
Instructions for Forms 1040 and
1040-SR to determine if you are
required to file a tax return. Even if
you don't have to file a tax return,
you may be eligible for a refund if
box 2 shows an amount or if you are
eligible for any credit
Earned income credit (EIC). You
may be able to take the EIC for
2020 if your adjusted gross income
(AGI) is less than a certain amount.
The amount of the credit is based
on income and family size. Workers
without children could qualify
for a smaller oredit. You and any
qualifying children must have valid
social security numbers (SSINs). You
can't take the EIC if your investment
income is more than the specified
amount for 2020 or if income is
earned for services provided while
you were an inmate at a penal
institution. For 2020 income limits
and more information, visit www.
irs.gov/EITC. See also Pub. 596,
Earned information, visit www.
irs.gov/EITC. See also Pub. 596,
Earned income Credit. Any EIC that
is more than your tax liability is
refunded to you, but only if you
file a tax return.
Clergy and religious workers. If
you aren't subject to social security

re more usen your tax liability is refunded to you, but only if you file a tax return.
Clergy and refligious workers, If you aren't subject to social security and Medicare taxes, see Pub. 517. Scoal Security and Other Information for Members of the Clergy and Religious Workers.
Corrections, If your name, SSN, or address is Incorrect. correct Ooples B. C. and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2.C. Corrected Wage and Tay Statement, with the Social Security Administration (ISSA) to correct any name. SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your cociles of Form W-2. Form your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 500-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you Credit for excess taxes. If you had more than one employer in 2020 and more than \$3,537.40 in social security and/or Tier 1 radinoal rethrement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railtoad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax. (See also Instructions for Forms (140).

## Instructions for Employee

(See also Notice to Employee.)

(See also Notice to Employee.)
Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 6. You may be required to report this amount on Form 8959, Additional Medicare Tax, See the Instructions for Forms 1040 and 1040–SR to determine if you are required to complete Form 8959, Box 6. This amount includes the 1,45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0,39% Additional Medicare wages and tips shown 5200,000.
Box 8. This amount is not included below 1.4 5 for 7. Facultiformation.

or mose insurance wages and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax rotum, see the instructions for Forms 1040 and 1040-89.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received,

report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes

security tips will be credited to your social security record (used to figure your benefits). Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441. Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts. Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deterral under a nonqualified or section 457(b) plan plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year, and you rare or will be age 62 by the end of the calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Special Wage Payments, with on and give you a copy. Social Security Administration and give you a copy. Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D. E., F. and S) and designated Roth contributions (codes Ab, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000.

In order for the information on this form to be effectively keypunched, it must be read upright. Therefore, attach this W-2 to your state, city, or local tax return as follows:





NOTE: THIS W-2 IS ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE, AND LOCAL/CITY INCOME TAX RETURNS. Instructions for Employee

Box 12 (continued)
However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k) (11) and 408(p) SIMPLE plans. This additional deferral amount is not subject to the overall limit on elective deferrals. For code G. the limit on elective deferrals may be higher for the last 8 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR.
Note: If a year follows code Deferral instructions for Forms 1040 and 1040-SR.

1040-SR.
Note: If a year follows code D through H, S. Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—It notificated social security or

ror me current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips, include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

G—Taxable cost of group-term life insurance over \$50,000 (included in boyes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(i) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(i) arrangement.

E—Elective deferrals under a section 406(i)(i) salary reduction agreement

F—Elective deferrals under a section 406(i)(i) salary reduction SEP.

G—Elective deferrals under a section 406(i)(ii) salary reduction SEP.

SEP

—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan H—Elective deferrals to a section 501(c)(13(D) tax-exempt organization plan. See the

Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sisk pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee

ine instructions for Forms 1040 and 1040–SR.

L— Substantiated employee business expense reimbursements (nortaxable)

M—Uncollected social security or RRTA tax on taxable cost of grouptern life insurance over \$50,000 (former employees only). See the instructions for Forms 1040 and 1040–SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040–SR.

—Excludable moving expense

1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting

this amount.

R—Employer contributions to your Archer MSA, Report on Form 8853, Archer MSAs and Long-Term Care Insurence Contracts.

S—Employee salary reduction contributions under a section 409(p) SIMPLE plan (not included in box 1) T—Adoption benefits (not included in box 1). Complete Form 8839. Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V—Income from exercise of

nontaxable amounts.
V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements. W-Employer contributions W—Employer contributions (including amounts the employee elected to contribute using a sect 125 (cafeteria) plan) to your healt savings account. Report on Form 8889, Health Savings Accounts (1546)

(HSAs). Y—Deferrals under a section 409A nonqualified deferred compensatio

plan
2—Income under a nonqualified
deferred compensation plan that
falls to satisfy section 409A. This

amount is also included in box 1, It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan
BB—Designated Roth contributions under a section 403(b) plan
DB—Cost of employer-soonsored

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not

EE-Designated Roth contributions punder a governmental section under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a multiful despit contribution habiting.

qualified small employer health reimbursement arrangement GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year Box 13. If the "Retirement plan" by is chapted, explicit limits Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangement (IRAs)

See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the lergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax, Include tips reported by the employer to the employer in railroad retirement (RRTA) compensation. Note: Keep Copy C of Forn W-2 for at least 3 years after the due date for filling your income tax return. However, to help protect your social security benefits, just in case there is a question about your work record and/or earnings in a particular year.