Copy B To Be Filed With Employee's 2020 OMB No. **FEDERAL Tax Return** 1 Wages, tips, other comp 2 Federal income tax withheld a Employee's social security number 76291.19 13103.67 4 Social security tax withheld 3 Social security wages 512-31-6862 **b** Employer ID number 79553.69 4932.33 6 Medicare tax withheld 5 Medicare wages and tips 45-3767548 79553.69 1153.53 c Employer's name, address, and ZIP code Ellucian Company LP 4 Country View Rd Malvern, PA 19355 d Control Number 46759 30002932 e Employee's name, address, and ZIP code Shivkumar Jungele 41987 Bushclover Terr Aldie, VA 20105 7 Social security tips 8 Allocated tips 9 Advance EIC payment 10 Dependent care benefits 11 Nonqualified plans Code C 134.40 13 Statutory employee 14 Other 12b Code D 3262.50 Retirement plan 12c Code DD 8743.12 12d Code 3rd party sick pay 2000.00 VA 30-453767548F-001 76291.19 4077.91
 15 State Empir.'s state I.D. #
 16 State wages, tips, etc.
 17 State

 18 Local wages, tips, etc.
 19 Local income tax
 20 Locality name
 17 State income tax Dept. of the Treasury - IRS

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Form W-2 Wage and Tax Statement

Form W-2 Wage and Tax Statement

This information is being furnished to the Internal Revenue Service

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2020 OMB No. 1545-0008 Copy 1 To Be Filed With Employee's State, City, or Local Income Tax Return 2 Federal income tax withheld 1 Wages, tips, other comp. a Employee's social 13103.67 security number 76291.19 3 Social security wages 4 Social security tax withheld 512-31-6862 4932.33 b Employer ID number 79553.69 5 Medicare wages and tips 6 Medicare tax withheld 45-3767548 79553.69 1153.53 c Employer's name, address, and ZIP code Ellucian Company LP 4 Country View Rd Malvern, PA 19355 d Control Number 46759 30002932 e Employee's name, address, and ZIP code Shivkumar Jungele 41987 Bushclover Terr Aldie, VA 20105 9 Advance EIC payment 8 Allocated tips 7 Social security tips 10 Dependent care benefits 11 Nongualified plans C 134.40 12b Code 13 Statutory employee D 3262.50 12c Code Retirement plan DD 8743.12 3rd party sick pay 12d Code W 2000.00 76291.19 4077.91 30-453767548F-001 # 16 State wages, tips, etc. 17 State
19 Local income tax 20 Locality name 17 State income tax 15 State Empir.'s state I.D. # 18 Local wages, tips, etc.

Dept. of the Treasury - IRS

Copy C For EMPLO Notice to Employe	OYEE'S e on ba	RECORDS (See ck of Copy B.)	2	2020 OMB No. 1545-0008
a Employee's social	1 V	lages, tips, other com	p. 2 Fe	deral income tax withheld
security number		76291	.19	13103.6
512-31-6862	3 S	ocial security wages	4 Sc	cial security tax withheld
b Employer ID number		79553		4932.33
45-3767548	5 N	ledicare wages and ti	ps 6 Me	edicare tax withheld
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15 State Emplr.'s state I.		16 State wages, tip		7 State income tax
18 Local wages, tips, etc.	19 Lo	cal income tax	20 Localit	y name
Form W-2 Wage and Tax	Stateme	nt	De	pt. of the Treasury - IRS

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

2020 OMB No.

Copy 2 To Be Filed With Employee's State,

City, or Local Incon		
a Employee's social	1 Wages, tips, other comp.	2 Federal income tax withheld
security number	76291.19	13103.67
512-31-6862	Social security wages	4 Social security tax withheld
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