W o Were and Tay Otatamant 2020		7 Social security tips	ſ	1 Wages, tips, other comp		2 Federal income		
Form W-2 Wage and Tax Statement 2020				841	189.89		7671.45	
c Employer's name, address, and ZIP code		8 Allocated tips		3 Social security wages		4 Social security tax withheld		
HEALTH CARE SERVICE CORP.				89923.18		5575.24		
300 E. RANDOLPH ST.		9		5 Medicare wages and tips		6 Medicare tax withheld		
PAYROLL DEPARTMENT, 38TH FLOOR				89923.18		1303.89		
		10 Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12		
CHICAGO IL 60601		- Ctatutani Datisament Third as	ortu		0.00		43.20	
e Employee's name, address, and ZIP code		13 Statutory Retirement Third-pa plan sick pay	y y	14 Other		12b	5733.29	
RAIHANA FATHIMA MOHAMED UMAR						8 D	5755.25	
5461 N EAST RIVER RD APT 1111		b Employer identification number (EIN)				i DD	1 7 4 1 2 0 2	
		36-1236610 a Employee's social security number				12d	17412.03	
CHICAGO IL 60656		XXX-XX-1579				c 9		
		<u>AAA-AA-1579</u>	_			ĕ		
15 State Employer's state ID number 16 State wages, tips	s, etc.	17 State income tax	18 Loc	al wages, tips, etc.	19 Local inc	come tax	20 Locality name	
IL 36-1236610 84	189.89	4061.22		• • • •	-			
Copy B-To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. Dept. of the Treasury - IRS								
				OMB No. 1545-0008		Visit the IRS we	ebsite 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 negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.								
		7 Social security tips		1 Wages, tips, other comp		2 Federal income		
Form W-2 Wage and Tax Statement 2020				84	189.89		7671.45	
c Employer's name, address, and ZIP code		8 Allocated tips				4 Social security	4 Social security tax withheld	
HEALTH CARE SERVICE CORP.				89923.18			5575.24	
300 E. RANDOLPH ST.		9		5 Medicare wages and tips 6 Medicare tax with		vithheld		
				899	923.18		1303.89	

300 E. RANDOLPH ST.		9		Niedicare wages and tips		6 Medicare tax withheid		
				899	923.18	1303.89		
PAYROLL DEPARTMENT, 38TH FLOOR		10 Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12		
CHICAGO IL 60601					0.00	^c C	43.20	
e Employee's name, address, and ZIP code		13 Statutory Retirement Third-p plan Sick pa	party 1	4 Other		12b		
RAIHANA FATHIMA MOHAMED UMAR 5461 N EAST RIVER RD APT 1111		b Employer identification number (EIN) 36-1236610			gae	ັ D 12c	5733.29	
						DD	17412.03	
CHICAGO IL 60656		a Employee's social security num	nber			12d		
		XXX-XX-1579				C ode		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local	wages, tips, etc.	19 Local ind	come tax	20 Locality name	
IL 36-1236610	84189.89	4061.22						
Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.) OMB No. 1545-0008 Dept. of the Treasury - IRS Visit the IRS website at www.irs.gov/efile.								

Form W-2 Wage and Tax Statement 2020	7 Social security tips	1 Wages, tips, other compensation 84189.89	2 Federal income tax withheld 7671.45	
c Employer's name, address, and ZIP code HEALTH CARE SERVICE CORP.	8 Allocated tips	3 Social security wages 89923.18	4 Social security tax withheld	
300 E. RANDOLPH ST.	9	5 Medicare wages and tips 89923.18	6 Medicare tax withheld 1303.89	
PAYROLL DEPARTMENT, 38TH FLOOR CHICAGO IL 60601	10 Dependent care benefits	11 Nonqualified plans 0.00	12a [§] C 43.20	
e Employee's name, address, and ZIP code RAIHANA FATHIMA MOHAMED UMAR	13 Statutory Retirement Third-party plan Statutory Plan Sick pay	14 Other	12b D 5733.29	
5461 N EAST RIVER RD APT 1111	b Employer identification number (EIN) 36-1236610		DD 17412.03	
CHICAGO IL 60656	a Employee's social security number	_	12d	
15 State Employer's state ID number 16 State wages, tips, e IL 36-1236610 8418		Local wages, tips, etc. 19 Local inc	20 Locality name	

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OMB No. 1545-0008

Dept. of the Treasury - IRS

		7 Social security tips	 Wages, tips, other comp 	ensation	2 Federal incom	e tax withheld	
Form W-2 Wage and Tax Statement	2020		841	189.89		7671.45	
c Employer's name, address, and ZIP code		8 Allocated tips	3 Social security wages			ocial security tax withheld	
HEALTH CARE SERVICE CORP.			899	923.18		5575.24	
300 E. RANDOLPH ST.		9		5 Medicare wages and tips 89923.18		6 Medicare tax withheld 1303.89	
			89				
PAYROLL DEPARTMENT, 38TH F	LOOR	10 Dependent care benefits	11 Nonqualified plans		12a		
CHICAGO IL 60601				0.00	C C	43.20	
e Employee's name, address, and ZIP code		13 Statutory Retirement Third-p plan sick page	arty 14 Other		12b		
RAIHANA FATHIMA MOHAMED UMAR 5461 N EAST RIVER RD APT 1111 CHICAGO IL 60656					D	5733.29	
		b Employer identification number	(EIN)		12c		
		36-1236610			DD	17412.03	
		a Employee's social security num	ber		12d		
		XXX-XX-1579			0 ode		
	6 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local inc	come tax	20 Locality name	
IL 36-1236610	84189.89	4061.22					

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