

Copy B - To Be Filed With Employee's FEDERAL Tax Return.			OMB No. 1545-0008		
a Employee's soc. sec. no. XXX-XX-5622	1 Wages, tips, other comp. 43203.77	2 Federal income tax withheld 4226.05			
b Employer ID number (EIN) 953372911	3 Social security wages 45193.29	4 Social security tax withheld 2801.98			
	5 Medicare wages and tips 45193.29	6 Medicare tax withheld 655.30			
c Employer's name, address, and ZIP code Total Renal Care Inc 32275 32nd Avenue South Federal Way, WA 98001					
d Control number					
e Employee's name, address, and ZIP code Prashanth Kulkarni 13201 TELMO Irvine, CA 92618					
7 Social security tips	8 Allocated tips	9			
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 C 14.16			
13 Statutory employee	14 Other CASDI 451.79	12b Code D 1989.52			
		12c Code DD 4084.59			
		12d Code			
		Retirement plan X			
Third-party sick pay					
CA 28161024	43203.77	1397.96			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			

Form W-2 Wage and Tax Statement 2020 Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service.

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return			OMB No. 1545-0008		
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Third-party sick pay					
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Form W-2 Wage and Tax Statement 2020 Dept. of the Treasury - IRS

Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)			OMB No. 1545-0008		
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Third-party sick pay					
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15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			

Form W-2 Wage and Tax Statement 2020 Dept. of the Treasury - IRS
This information is being furnished to the IRS. 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.

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