Form W-2 Wage and Tax Statement	2020		7 Social security tips		1 Wages, tips, other comp		2 Federa	I income ta	x withheld 11231.83
C Employer's name, address, and ZIP code JPMORGAN CHASE BANK, NA 500 STANTON CHRISTIANA ROAD NEWARK DE 19713			8 Allocated tips		114126.61 3 Social security wages		4 Social security tax withheld		
			9		118326.61 5 Medicare wages and tips		7336.25 6 Medicare tax withheld		
			10 Dependent care benefits		118326.61 11 Nonqualified plans		1715.74		
e Employee's name, address, and ZIP code			13 Statutory Retirement Third employee plan sick	d-party pay	14 Other		€ C 12b		48.00
SREENATH REDDY VUTUKURU			X		1		D 12c		4200.00
8401 MEMORIAL LN APT 7349			<b>b</b> Employer identification number 13-4994650	er (EIN)			DD		17104.80
PLANO TX 75024			<b>a</b> Employee's social security number $817-67-7656$				12d	12d	
15 State Employer's state ID number	16 State wages, tips, etc		17 State income tax	18 10	ocal wages, tips, etc.	19 Local in	come tax		20 Locality name
	To otate wages, tips, etc		17 State modifie tax	10 20		19 Local III			
Copy B-To Be Filed With Employee's FED	 DERAL Tax Return	1 7	This information is being furnished	to the Int					Treasury - IRS
					OMB No. 1545-0008				ite at www.irs.gov/ef
			7 Social security tips	This ir neglige		e Service. If you are required to file a tax return, a you if this income is taxable and you fail to report if  2 Federal income tax withheld			
Form W-2 Wage and Tax Statement 2020					1 Wages, tips, other compensation 114126.61		11231.83		
c Employer's name, address, and ZIP code JPMORGAN CHASE BANK, NA 500 STANTON CHRISTIANA ROAD NEWARK DE 19713			8 Allocated tips		3 Social security wages 118326.61		4 Social security tax withheld 7336.25		
			9		5 Medicare wages and tips		6 Medicare tax withheld 1715.74		
			10 Dependent care benefits		118326.61 11 Nonqualified plans		12a See instructions for box 12		
e Employee's name, address, and ZIP code			13 Statutory Retirement Third-party sick pay		14 Other		12b	<u> </u> 	48.00
SREENATH REDDY VUTUKURU			<b>b</b> Employer identification number		-		12c		4200.00
8401 MEMORIAL LN APT 7349 PLANO TX 75024			13-4994650 a Employee's social security number 817-67-7656		_		DD 12d		17104.80
							c 20		
15 State Employer's state ID number	16 State wages, tips, etc		17 State income tax	18 Lo	ocal wages, tips, etc.	19 Local in	come tax	1:	20 Locality name
Form W-2 Wage and Tax Statement 2020			7 Social security tips		1 Wages, tips, other compensation 114126.61		2 Federal income tax withheld 11231.83		
c Employer's name, address, and ZIP code  JPMORGAN CHASE BANK, NA  500 STANTON CHRISTIANA ROAD  NEWARK DE 19713			8 Allocated tips		3 Social security wages 118326.61		4 Social security tax withheld 7336.25		
			9		5 Medicare wages and tips		6 Medicare tax withheld		
			10 Dependent care benefits		118326.61  11 Nonqualified plans		1715.74		
e Employee's name, address, and ZIP code			13 Statutory Retirement Third employee plan sick	d-party pay	14 Other		€ C 12b		48.00
SREENATH REDDY VUTUKURU 8401 MEMORIAL LN APT 7349 PLANO TX 75024			b Employer identification number (EIN)  13-4994650  a Employee's social security number  817-67-7656		-		12c		4200.00
							DD 12d		17104.80
							12 <b>0</b>		
15 State Employer's state ID number	16 State wages, tips, etc		17 State income tax	18 Lo	ocal wages, tips, etc.	19 Local in	come tax	1:	20 Locality name
				ļ					
Copy 2-To Be Filed With Employee's Stat	te, City, or Local Ir	ncome	Tax Return	01	MB No. 1545-0008		Dept.	of the 1	Treasury - IRS
			7 Social security tips		1 Wages, tips, other compensation		2 Federal income tax withheld		
Form W-2 Wage and Tax Statement 2020 c Employer's name, address, and ZIP code			8 Allocated tips		114126.61 <b>3</b> Social security wages		11231.83 4 Social security tax withheld		
JPMORGAN CHASE BANK, NA 500 STANTON CHRISTIANA ROAD NEWARK DE 19713			,		118326.61  5 Medicare wages and tips		7336.25		
			10 Dependent care benefits		118326.61		1715.74		
					11 Nonqualified plans	12a C 48.00			
e Employee's name, address, and ZIP code  SREENATH REDDY VUTUKURU  8401 MEMORIAL LN APT 7349  PLANO TX 75024			13 Statutory Retirement Third-party sick pay  b Employer identification number (EIN)  13-4994650  a Employee's social security number		14 Other		12b D 4200.00		
							12c		
							12d	DD 17104.80	
			817-67-7656		-		od e		
15 State Employer's state ID number	16 State wages, tips, etc		17 State income tax	18 Lo	ocal wages, tips, etc.	19 Local in	come tax	:	20 Locality name
Conv. O. To. Do. Filed With Free Love 1. Co.	le City and and		Toy Pot	<u> </u>	WD N. 4545		D : : :		
Copy 2-To Be Filed With Employee's Stat	le, City, or Local II	icome	I I AX NELUTTI	Ol	MB No. 1545-0008		υept.	or trie	Treasury - IRS