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 do not 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 innour 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 credit is based on income and family size.

Workers without châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the HEI for your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an intante at a penal institution. For 2020 income limits and more information, vist www. ris. gov/EITC.

Also see 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.

Also see Pub. 390, named informe cream. Full factors and a finite factor and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSR, or money amount error reported to the SSA on Form W-2. Be use to get your copies of Form W-2 from 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 annear at any SSA office or by calling 800-772-1213. 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 had more than one employer in 2020 and more than S8.537.40 in social security and/or Tier 1 railroad retirement (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 archive for the excess fave your federal income tax. If you had more than ore than 65.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the excess against your federal more than 65.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the structures for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for 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 5. You may be required to report this amount on Form 899, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8999.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips show; in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abov \$200.000.

SOURCE SET OF STEAM SUBSTITUTE OF STEAM SUBSTI

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

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

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K—20% excise tax on excess gol

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Betieve deferral (codes D, E, F, and S) and designated Roth contributions (codes AA, Ba, and EE) under all plans are generally limited to a total of \$19,500 (\$313,500 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 Har elimited to \$7,000.

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 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall levit we deferral limit must be included in income. See the instructions for Forms 1040 and 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. Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 tax on tips. Include this tax on Form 1040 or 1040-SR. See the 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.

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under

a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement.

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

employees only). See the instructions for Forms 1040 and 1040-SR.

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

O—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 Insurance Contracts.

S—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontraxble 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—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (calleteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails 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 1040-954.

amount is also the clased in to 8x 1. It is volved to an automotical abs to the instructions for Forms 1040 and 1040-SR.

A.A.—Designated Roth contributions under a section 401(k) plan
B.—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not tracible.

B. Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply one outsthetone Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan.

The —Permitted benefits under a qualified small employer health ambusement arrangement
GG—Income from qualified equity grants under section 83(b)
H.—Aggregate defernals under section 83(b) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
RA contributions you may deduct. 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 clercy's parsonage allowance and utilities.

withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable neone, educational assistance payments, or a member of the Cergy'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 employee to the employer in railroad retirement (RRTA) compensation.

Form W-2 Wage and Tax Statement

2020

Copy C, for employee's records

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 immosed on you if this income is taxable and you fail to report it.

									may be imposed	on you if this income is taxable and you fa	
d Control number Void			c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service					
0942-16028015 0000100280-10			100000		MYTHRI CO	NSULTING LLC		OMB No. 1545-0008			
b Emplo	b Employer's identification number a Emp			social security nu	ımber	8668 JOHN HICKMAN PARKWAY			1 Wages, tips, other compensation	2 Federal Income tax withheld	
46-5248404			797-59-3607			SUITE 402			12125.07		
	tutory loyee I	Ret	irement	Third-party sick pay		FRISCO TX 75034			3 Social Security wages	4 Social Security tax withheld	
2p		piu	John pay			FRISCO IX	/5034		12125.07	751.75	
12 See Instrs. for Box 1		2	14 Other			e Employee's name, ac	idress, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
			DI UI/HC/WD		51.54 31.53				12125.07	175.81	
						KRISHNA KA 215 LINDEN	ANTH REDDY PO AVENUE	DDDUTURI	7 Social Security tips	8 Allocated Tips	
						APT 1			10 Dependent care benefits	11 Nonqualified plans	
						JERSEY CITY NJ 07305			Verification Code		
15 State	Employ	er's stat	e I.D. No.	16 State wages	, tips, etc.	17 Stat	e income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
NJ 465-248-4		3-404	/000		12	2125.07	558.75				
NJ	FLI	LI					19.41				

Form W-2 Wage and Tax Statement

2020

2020

Copy B, to be filed with employee's FEDERAL tax return

		_									
0942-16028015 0000100280-100000			Void		s name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
			797-:	59-3607 Third-party sick pay		8668 JOHN HICKMAN PARKWAY SUITE 402			1 Wages, tips, other compensation 12125.07	2 Federal Income tax withheld 1800.27	
						FRISCO	O TX 75034		12125.07	751.75	
12 See Instrs. for Box 12		12	14 Other UI/HC/WD DI		51.54 31.53	KRISH	's name, address, and ZIP code NA KANTH REDDY PO NDEN AVENUE	ODDUTURI	5 Medicare wages and tips 12125.07 7 Social Security tips	6 Medicare tax withheld 175.81 8 Allocated Tips	
						APT 1 JERSE	Y CITY NJ 07305		10 Dependent care benefits Verification Code	11 Nonqualified plans	
15 State Employer's state I.D. No. NJ 465-248-404/000 NJ FLI				1 * * * * * * * * * * * * * * * * * * *			17 State income tax 558.75	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
							19.41				

Form W-2 Wage and Tax Statement

Copy 2, to be filed with employee's tax return for NJ

d Control number		Void	c Employer's name, address, and ZIP code MYTHRI CONSULTING LLC					Department of the Treasury - Internal Revenue Service					
0942-16028015 0000100280-1000								100000		OMB No. 1545-0008			
b Employer's identification number a Employee's social security					8668 JOHN HICKMAN PARKWAY					es, tips, other compensation	2 Federal Income tax withheld		
46-5248404		797-59-3607			SUITE 402				1 wage	12125.07		1800.27	
13 Statutory Employee	Retiren	nent	Third-party sick pay		FRISCO TX 75034				3 Social Security wages			4 Social Security tax withheld	
					FRISCO	RISCO 1X /3034				12125.07	751.75		
12 See Instrs. for Box 1		Other		51.54	e Employee's name, address, and ZIP code					care wages and tips	6 Medicare tax withhele	d	
		I/HC/WD								12125.07	175.81		
		I	3		KRISHNA KANTH REDDY PODDUTURI					al Security tips	8 Allocated Tips		
					215 LINDEN AVENUE								
					APT 1	APT 1				endent care benefits	11 Nonqualified plans		
					JERSEY CITY NJ 07305								
									Veri	Verification Code			
15 State Employ	. No.	16 State wages,	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name			
NJ 465-24	8-404/0	00	1		2125.07		558.75						
NJ FLI							19.41						
							,						