Development

Form W-2 Wag	ge and Ta	ax Statement	
Copy C - For EMPLOYER	E'S RECOR	os 2020	
This information is being furnished to the IRS. to file a tax return, a negligence penalty or othe imposed on you if this income is taxable and y	If you are required	OMB No. 1545-0008	
Control 08001 ACCH	02981	L	
Employer's name, address, and ZIP code PAYCOM PAYROLI PAYCOM 7501 W MEMORIA	AL RD	140	Gross Pay Less: Non-Tax Less: Retirem Less: Other Pr Less: Third Pa Less: Excess
	OK 73	142	Total Reported
Employee's name, address, and ZIP code SAI CHARANREDI 4201 WEST MEMO			
OKLAHOMA CITY		- /	Tax Withheld
119618.49 1 Wages, tips, other comp.	1	21853.84 ncome tax withheld	
122329.20		7584.41	
3 Social security wages	4 Social s	ecurity tax withheld	Gross Pay
122329.20		1773.77	Less: Non-Tax
5 Medicare wages and tips	6 Medicar	e tax withheld	Less: Retirem Less: Other P
7 Social security tips	8 Allocate	d tips	Less: Third Pa Total Reported
9	10 Depend	ent care benefits	
11 Nonqualified plans	12a D 12b DD	3369.48 5479.50	Tax Withheld

13 Statutory employee

Retirement plan

X

Employee's social security no.

Employer ID number (EIN) 26-0302465

15 St. Employer's state ID number OK 26-0302465

18 Local wages, tips, etc.

Form W-2

115-69-4068

Third-party sick pay

12c

12d

14 LTI

119618.49

19 Local income tax

16 State wages, tips, etc. 17 State income tax

Wage and Tax Statement

37173.62

5439.00

20 Locality name

	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages and Tips
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
Gross Pay	\$123,013.97	\$123,013.97	\$123,013.97
Less: Non-Taxable Earnings	\$0.00	(\$658,77)	(\$658,77)
Less: Retirement Deductions	(\$3,369.48)	N/A	N/A
Less: Other Pre-tax Deductions	(\$26.00)	(\$26.00)	(\$26.00)
Less: Third Party Sick Pay	\$0.00	\$0.00	\$0.00
Less: Excess Wages	N/A	\$0.00	N/A
Total Reported Wages	\$119,618.49	\$122,329.20	\$122,329.20
	Fed Income	Social Security	Medicare
	Box 2 of W-2	Box 4 of W-2	Box 6 of W-2
Tax Withheld	\$21,853.84	\$7,584.41	\$1,773.77

	OK State Wages, Tips, etc.
	Box 16 of W-2
Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions	\$123,013.97 \$0.00 (\$3,369.48) (\$26.00)
Less: Third Party Sick Pay	\$0.00
Total Reported Wages	\$119,618.49
	OK State Income Tax
	Box 17 of W-2

\$5,439.00

SAI CHARANREDDY KAMIREDDY 4201 WEST MEMORIAL ROAD, APT:6104 OKLAHOMA CITY, OK 73134

The Form W-2 Box 1 wages are the Gross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus any additional compensation received after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, etc.

Form W-2 Wage and Tax Statement Copy 2 – To Be Filed With 2020				
Employee's State, City, or	Loo	cal	Dee	OMB No. 1545-0008 partment of Treasury -
Income Tax Return.			Inte	ernal Revenue Service
number USUUL ACCI	H	0298	1	
Employer's name, address, and ZIP code PAYCOM PAYRO PAYCOM	LL	LLC		
7501 W MEMOR	т л	תם ד		
OKLAHOMA CITY			14	2
Employee's name, address, and ZIP code SAI CHARANREDDY KAMIREDDY 4201 WEST MEMORIAL ROAD, AP.				
OKLAHOMA CITY	Y	OK 73	13	4
119618.4 1 Wages, tips, other comp.		2 Federal		853.84 ne tax withheld
122329.2	0		7	584.41
3 Social security wages	-	4 Social s	ecur	ity tax withheld
122329.20 5 Medicare wages and tips		1773.77 6 Medicare tax withheld		
7 Social security tips		8 Allocated tips		
9		10 Dependent care benefits		
11 Nonqualified plans		12a D		3369.48
		12b DD		5479.50
13 Statutory Retirement Third-party plan Sick pay	У	12c		
		12d		
Employee's social security no. $115-69-4068$		14 LTI		37173.62
Employer ID number (EIN) $26-0302465$				
15 St. Employer's state ID number	16	State wages, tip	s, etc.	17 State income tax
OK 26-0302465	1	19618.	49	5439.00
18 Local wages, tips, etc.	19	Local income tax	c.	20 Locality name

Form W-2 V	Va	ge and Ta	ax S	tatement]
Copy 2 — To Be Filed V				2020	
Employee's State, City, or	Loo	cal		MB No. 1545-0008 rtment of Treasury -	
Control 08001 ACC	u	02981		al Revenue Service	{
Employer's name, address, and ZIP code		02901			1
PAYCOM PAYRO		LLC			
PAYCOM					
7501 W MEMOR	IA	L RD			
OKLAHOMA CIT	Y	OK 73	142	2	
Employee's name, address, and ZIP code					1
SAI CHARANRE					
4201 WEST MEI					
OKLAHOMA CITY	Y	OK 73	134	ŧ	
119618.4				353.84	
1 Wages, tips, other comp		2 Federal in		e tax withheld	-
122329.2	0	4.0		584.41	
3 Social security wages	0	4 Social se	-	y tax withheld	-
122329.20		1773.77 6 Medicare tax withheld			
5 Medicare wages and tips7 Social security tips		8 Allocated tips			1
		6 Allocate	u ups		
9		10 Depende	ent ca	are benefits	1
11 Nongualified plans		12a D	3	3369.48	1
		12b DD	5	5479.50	1
13 Statutory Retirement Third-part plan Sick pay	y	12c			1
X		12d			1
Employee's social security n	0.	14			1
115-69-4068		LTI		37173.62	
Employer ID number (EIN)					
26-0302465			,		
15 St. Employer's state ID number		State wages, tips,		7 State income tax	
OK 26-0302465	1	19618.4	19	5439.00	c
18 Local wages, tips, etc.	19	Local income tax	2	20 Locality name	74.4
					0
	1				15

2020 Copy B — To Be Filed With OMB No. 1545-0008 Department of Treasury -Internal Revenue Service Employee's FEDERAL Tax Return. This information is being furnished to the IRS. Control number 08001 ACCH 02981 Employer's name, address, and ZIP code PAYCOM PAYROLL LLC PAYCOM 7501 W MEMORIAL RD OKLAHOMA CITY OK 73142 e's name, address, and ZIP co SAI CHARANREDDY KAMIREDDY 4201 WEST MEMORIAL ROAD, AP. OKLAHOMA CITY OK 73134 21853.84 119618.49 2 Federal income tax withheld Wages, tips, other comp. 122329.20 7584.41 3 Social security wages 4 Social security tax withheld 122329.20 1773.77 5 Medicare wages and tips 6 Medicare tax withheld 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 12a D 11 Nonqualified plans 3369.48 126 DD 5479.50 Third-party sick pay 13 Statutory employee Retirement 12c X 12d Employee's social security no. 14 115-69-4068 LTI 37173.62 Employer ID number (EIN) 26-0302465 15 St. Employer's state ID number 16 State wages, tips, etc. 17 State income tax OK 26-0302465 119618.49 5439.00 20 Locality name 18 Local wages, tips, etc. 19 Local income tax

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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. You may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit. Earned income 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 the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. See also 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.

Clergy and religious workers. If you aren't subject to social security 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 name, SSN, or

money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c 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 name 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 \$8,537.40 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 one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions 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 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.
Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

(Instructions for Employee continued on back of Copy 2.)

Instructions for Employee (Continued from back of Copy B.)

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 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 H are limited 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 elective 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.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

V-Income from exercise of nonstatutory stock

Nontaxable Income, for reporting requirements.

on Form 8889, Health Savings Accounts (HSAs)

Y-Deferrals under a section 409A nonqualified

to an additional 20% tax plus interest. See the

compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject

AA—Designated Roth contributions under a section 401(k) plan

BB-Designated Roth contributions under a section

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount

Z-Income under a nonqualified deferred

Instructions for Forms 1040 and 1040-SR.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report

option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and

B-Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C-Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

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

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) taxexempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J-Nontaxable sick pay (information only, not included in box 1, 3, or 5)

 $K{-}20\%$ excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

(Instructions for Employee continued on back of Copy C.)

Instructions for Employee (Continued

from back of Copy 2.)

Box 12. (continued)

L-Substantiated employee business expense reimbursements (nontaxable)

M-Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N-Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

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

 ${\bf Q-}Nontaxable$ combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

 ${\rm R-Employer}$ contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction 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 compute any taxable and nontaxable amounts.

benses, unts. does not apply to contributions under a tax-exempt organization section 457(b) plan. FF – Permitted benefits under a qualified small employer health reimbursement arrangement

403(b) plan

deferred compensation plan

GG—Income from qualified equity grants under section 83(i)

 $\ensuremath{\textbf{HH}}\xspace - \ensuremath{\textbf{Aggregate}}\xspace$ deferrals under section 83(i) 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 IRA 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 clergy'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.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.