



**W-2** Employee Reference Copy  
Wage and Tax Statement  
2020  
OMB No. 1545-0008

Copy C for employee's records.

d Control number	Dept.	Corp.	Employer use only
000002 K7/49D			4

c Employer's name, address, and ZIP code  
**NARVEE TECH INC**  
 17440 DALLAS PKWY SUITE 102  
 DALLAS, TX 75287

Batch #90749

e/f Employee's name, address, and ZIP code  
**PUNEET BANDARI**  
 6147 VISTA DR  
 APT 4301  
 WEST DES MOINES, IA 50266

b Employer's FED ID number	a Employee's SSA number
81-4260281	XXX-XX-8960
1 Wages, tips, other comp.	2 Federal income tax withheld
42500.00	6832.65
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14 Other	12b
	12c
	12d
13 Stat emp.	Ret. plan
	3rd party sick pay
15 State	Employer's state ID no.
16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2
Gross Pay	42,500.00	42,500.00	42,500.00
Reported W-2 Wages	42,500.00	0.00	0.00

2. Employee Name and Address.

**PUNEET BANDARI**  
 6147 VISTA DR  
 APT 4301  
 WEST DES MOINES, IA 50266

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1 Wages, tips, other comp.	2 Federal income tax withheld		
42500.00	6832.65		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000002	K7/49D		4
c Employer's name, address, and ZIP code <b>NARVEE TECH INC</b> 17440 DALLAS PKWY SUITE 102 DALLAS, TX 75287			
b Employer's FED ID number	a Employee's SSA number		
81-4260281	XXX-XX-8960		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other	12b		
	12c		
	12d		
13 Stat emp.	Ret. plan		
	3rd party sick pay		
e/f Employee's name, address and ZIP code <b>PUNEET BANDARI</b> 6147 VISTA DR APT 4301 WEST DES MOINES, IA 50266			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

**W-2** Federal Filing Copy  
Wage and Tax Statement  
2020  
OMB No. 1545-0008  
Copy B to be filed with employee's Federal Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
42500.00	6832.65		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000002	K7/49D		4
c Employer's name, address, and ZIP code <b>NARVEE TECH INC</b> 17440 DALLAS PKWY SUITE 102 DALLAS, TX 75287			
b Employer's FED ID number	a Employee's SSA number		
81-4260281	XXX-XX-8960		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a		
14 Other	12b		
	12c		
	12d		
13 Stat emp.	Ret. plan		
	3rd party sick pay		
e/f Employee's name, address and ZIP code <b>PUNEET BANDARI</b> 6147 VISTA DR APT 4301 WEST DES MOINES, IA 50266			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

**W-2** State Reference Copy  
Wage and Tax Statement  
2020  
OMB No. 1545-0008  
Copy 2 to be filed with employee's State Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
42500.00	6832.65		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000002	K7/49D		4
c Employer's name, address, and ZIP code <b>NARVEE TECH INC</b> 17440 DALLAS PKWY SUITE 102 DALLAS, TX 75287			
b Employer's FED ID number	a Employee's SSA number		
81-4260281	XXX-XX-8960		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a		
14 Other	12b		
	12c		
	12d		
13 Stat emp.	Ret. plan		
	3rd party sick pay		
e/f Employee's name, address and ZIP code <b>PUNEET BANDARI</b> 6147 VISTA DR APT 4301 WEST DES MOINES, IA 50266			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

**W-2** City or Local Reference Copy  
Wage and Tax Statement  
2020  
OMB No. 1545-0008  
Copy 2 to be filed with employee's City or Local Income Tax Return.