Notice to Employee
Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Free me 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 income recdit (EC). You may be able to take the EIC for 2019 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 children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can this take the EIC if your airestement income is more than the specified amount for 2019 or if ancome is earned for services provided while you were an intained at a penal institution. For 2019 in come limits and more information, vist www.sr.goveETIC.

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 employer to correct your employer to the correct way and the state of the correct way and any 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, SSN, or money amount crorr reported to the SAs on Form W-2. Be sure 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 to that each give an early 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 2019 and more than 88,239.80 in social security and/or TFr 1 railroad retirement (RSTA) 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 54,830 in 1 TFr 2 RSTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

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 8999, Additional Medicare Tax. See the Form 1040 instructions. You may be required to report this amount on Form 8999, and the second of the federal income tax withheld on all Medicare wages and tips shown Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown as NAPIE retrement account that is grant of a section 401(k) arrangement. Also includes deferrals under a SIMPLE retrement account that is grant of a section 401(k) arrangement.

\$200,000.

Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

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 that you recreded a smaller amount. If you have records that show the actual amount of tips your received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate

must report as income and on other tips you did not report to your employer. By filing Form 4137, syour social security in well be credited to by your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security in the solid possible transmitted dependent care benefits that you can be so your social security or RATA tax on tratable cost of group-term life insurance over \$50,000 also is included in hox 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any tratable and nontaxable amounts.

Box 11. This amounts (a) reported in box 1 if it is a distribution made to you from a nonqualified of 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 are or will be soon to your are or will be age 62 by the end of the calcular year, your employer should if the Form \$8.34, 21. The Allong of the proper should for the year, your employer should if the Form \$8.34, 21. The Allong of the propers of the year of year of the year of the year of year year your employer should if the Form \$8.34, 21. The year of year year your employer should its form year, your employer should its form year, your 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

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 \$19,000 (\$13,000 if you only more SIMPLE plans, \$22,000 for socion 403(b) plans if you qualify for the \$1-5-year rule explained in Pub. \$71). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to

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included in income: See the assultances for Point 1990.

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. See the Form

E-Elective deferrals under a section 403(b) salary reduction agree 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) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to mute any taxable and nontaxable amounts.

ompute any taxanie and nonaxanie amounts.

—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social scurity 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 (cafeteria) plun) to your health savings account. Report on Form 8889, Health Savings Accounts

(HSAs). V—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 Form 1040 instructions.

1040 instructions.

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

BB—Designated Roth contributions under a section 403(b) plan

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

BB—Designated Koth contributions under a section 43(5) plan
DD—Cost of emphyser-sponsored health coverage. The amount reported with Code DD is not
taxable to the 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 at sux-except organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reinbursement arrangement
GG—Income from qualified equalty grants 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, montacable income,
withheld, union dues, uniform payments, health insurance premiums deducted, montacable income,
withheld union dues, uniform payments, health insurance premiums deducted, montacable income,
Raifoud employers use this box to report information such as state disability insurance taxes
withheld union Macken article to the control of the properties of the control of the prop

Form W-2 Wage and Tax Statement

2019

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 immorsed on your if this income is subable and you fall to report it.

			•	may be imposed	on you if this income is taxable and you fai		
d Control number 0088-13083587 000 b Employer's identification number	0000003- a Employee's social security nu	ES SE	er's name, address, and ZIP code ARCH CONSULTANTS	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
83-2790849 13 Statutory Retirer	398-49-8293	823 C	ANONGATE DR VER MOUND TX 75022	1 Wages, tips, other compensation 69620.00	2 Federal Income tax withheld 9790.85		
Employee plan	sick pay			3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	4 Other	e Employ	ee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld		
			IJAN R ANDEM N EAST RIVER RD APT 1509	7 Social Security tips	8 Allocated Tips		
		CHIC	AGO IL 60656	10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state LI IL 832790849	D. No. 16 State wages	69620.00	17 State income tax 3446.19 18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement

2019

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

d Control number Void 0088-13083587 0000000003-			c Employer's name, address, and ZIP code ES SEARCH CONSULTANTS				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008						
		0 8203		825 CANONGATE DR FLOWER MOUND TX 75022				69620.00		2 Federal Income tax withheld 9790.85 4 Social Security tax withheld			
12 See I	12 See Instrs. for Box 12 14 Other					e Employee's name, address, and ZIP code				5 Med	care wages and tips	6 Medicare tax withheld	
						SHRUJAN R ANDEM 5451 N EAST RIVER RD APT 1509 CHICAGO IL 60656				7 Social Security tips		8 Allocated Tips	
										10 Dependent care benefits		11 Nonqualified plans	
15 State Employer's state I.D. No. 16 State wages, tips, etc.					17 State income tax	,	18 Local wages, tips, etc.		19 Local income tax	20 Locality name			
IL	8327908	849			69	9620.00	344	6.19					

Form W-2 Wage and Tax Statement

2019

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

d Control number Void			Void	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service					
0088-13083587 0000000003-			ES SEARCH CONSULTANTS				OMB No. 1545-0008						
b Employer's identification number a Employee's social security number			825 CANONGATE DR										
83-2790849 398-		3-49-8293		FLOWER MOUND TX 75022				1 Wag	es, tips, other compensation 69620.00	2 Federal Income tax withhe	9790.85		
		Third-party sick pay		TEOWER MOOND TA 75022		3 Social Security wages 4 Social		4 Social Security tax withhe					
12 See Instrs. for Box 12 14 Ot			Other			e Employee's name, address, and ZIP code				5 Medi	care wages and tips	6 Medicare tax withheld	
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						SHRUJAN R ANDEM 5451 N EAST RIVER RD APT 1509					al Security tips	8 Allocated Tips	
						CHICAGO IL 60656					pendent care benefits	11 Nonqualified plans	
15 State	Employ	er's state I.I). No.	16 State wages	, tips, etc.		17 State income tax	ī	18 Local wages, tips, etc.	•	19 Local income tax	20 Locality name	
IL	832790	849			69	9620.00		3446.19					