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 hox 2 shows an amount or if you are eligible for any credit. Emmed income credit (BC), You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The annount of credit is based on income and family size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your avissment income is more than the specified amount for 2020 or if income is carned for services provided while you were an immate at a penal institution. For 2020 in come hims and more information, vist www srs. gov/ETIC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return.

Also see Pub. 590, taiment income creater, sur lace una to more una to more una to the second of the second Service and the service of the servi 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-2 form our 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-sponsore the datch coverage (if stack 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 Tjer 1 railroad retirement (RKTA) taxes were withheld, you also may be able to claim a credit for the scccss against your federal neone tax. If you had more than calload employer and more than S5,012.70 in Tire 2 RRTA tax was withheld, you also may be able to claim actual instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

A set of the set of the set of the set of your tax return. Box 1. Enter this amount on the edgeal income tax withheld 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 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 sho in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips ab \$200.000.

\$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 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 you with the adult amount of tips you records, that you received as maller amount. If you have records that you with the adult amount of tips to you records, the your exist and the advector of the start be advected by the start and and the first of the start of the start

figure the social security and Medicare tax owed on tips you didn't report to your emphayer. Enter this J-amount on the wages line of your tax return. By filing Form 4137, your social security tps will be for 10 This amount includes the total dependent care benefits hat your employer paid to your or incurred on your behalf (including amounts from a section 125 (caffetria) plan). Any amount over \$5,000 ato is included in box 1. Complete Form 2441. Child and Dependent Care Expenses, to Social security and the security and the security of the security of the security deferred compensation on nongovernmental section 457(b) plan, or (b) included in box 3 and/or 511 if in a parity part of the security and Medicare taxes this year because there is no longer a substantial risks of forfeiture of your re right to the deferred amount. This box should'th be used if you had a deferral and a faithoriton in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are ow till be age (62 by the end of the calendary year, your employer should file Form SAS.13, Employer Report of Special Wage Payments, with the Social Security Administration and give you ar topp.

Box 12. The following list explains the codes shown in box 12. You may need this information to Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax returns. Elective deferrals (codes D, E, F, and S) and designatel Roh contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only we SIMPLE plans). S22,500 for scion 403(b) plans is you qualify for the 15-year net 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 last age 50 in 2020, your employer may have allowed an additional deferral of up to \$5,500 (\$3,000 for section 401(b) (plans) (J) and 408(b) ShHDET plans). This additional deferral amount is not subject to the overall limit on decivicy deferrals. For code G, the limit on decivity deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amountin encode to the overall elective deferral limit must be

administrator for more information. Amounts in excess of the overall electrice deternal limit must included in income. See the instructions for Forms 1000 and 1040-581. 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 deferrads, consider these amounts for the year shown, not the current year. If no year is Caccas decremany, consider tracks information on use year association on use current year. It is year is shown, the contributions are for the current years. 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. 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

B—Elective deferrals to a section 40(k) cash of a section 40(k) arrangement a SIMPLE reitement account that is part of a section 40(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)

2020

2020

deferred compensation plan H-Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5) K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

-Substantiated employee business expense reimbursements (nontaxable)

L—autonaminate employee usings expensive remnonsements (nonnamore) M—Uncollected social security or RRTA ax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR . M—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.

employees only). See the instructions for Forms 1040 and 1040-SR. P—Excludable moving expense reimburscennets paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5) Q—Nontaable combat pay. See the instructions for Forms 1040 and 1040-SR for details on reporting this amount. R—Employer combat pay. See the instructions for Forms 1040 and 1040-SR for details on R—Employer combat pay. See the instructions for Forms 1040 and 1040-SR for details on R—Employer combat pay. See the instructions for Forms 1040 and 1040-SR for details on R—Employer combat pay. See the instructions for Forms 1040 and 1040-SR for details on R—Employer combat pay. See the instructions for Forms 1040 and 1040-SR for details on R—Employee sharp reduction combations under a section 408(p) SIMPLE plan (not included in box N—Employee sharp reduction combations 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

-Employer contributions (including amounts the employee elected to contribute using a section 5 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts

-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-SR.

instructions for Forms 1040 and 1040-SR. AA—Designated Roth contributions under a section 401(k) plan BB—Designated Roth contributions under a section 403(b) plan D—Cost of employer-sponsored health coverage: The amount reported with Code DD is not taxable. BE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under at accempt organization section 457(b) plan. FE—Permitted benefits under a qualified small employer health reinbursement arrangement GG—Income from qualified quary grants under section 83(i) HIB—Aggregate deferrals under section 83(o) clections as of the close of the calendar year Box 13.1 (If er Keirement plan¹⁵ box) 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 14.1 employers may use this box to report information such as state disability insurance taxes withEdL union dues, uniform payments, health insurance premiums deducted, nontaxable income,

withheld, unnor dues, unitorm payments, neath insurance premiums deducted, nontaxable neome, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Raihoad empbyers use this hox to report raihoad 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 raihoad retirement (RRTA) compensation.

ecupacyer in marcoaa returement (KRLA) compensation. Note: Keep Copy C of Form V-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.

Form W-2 Wage and	I Tax Statement
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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 imposed on you if this income is taxable and you fail to report it. Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 d Control numb c Employer's name, address, and ZIP code Void 0035-18100061 000000060-APPTRICS LLC b Employer's identification number a Employee's social security number 4555 MANSELL ROAD 3RD FLOOR 2 Federal Income tax withh 1 Wages, tips, other com 81-4423705 856-58-4404 71710.00 9344.25 ALPHARETTA GA 30022 13 Statutory Employee Retire plan Third-party sick pay 3 Social Security wages 4 Social Security tax with 13200.00 818.40 12 See Instrs. for Box 12 14 Othe e Employee's name, address, and ZIP code 5 Medicare wages and tip: 6 Medicare tax withheld 132<u>00.00</u> 191.40 HARENDRA VARMA RUDRARAJU 7 Social Security tips 8 Allocated Tips 13653 STRATFORD GLEN PL 10 Dependent care benefits 11 Nongualified plans HERNDON VA 20171 Verification Code 15 Stat 19 Local income tax 20 Locality name Employer's state I.D. No 16 State wages, tips, etc 17 State income tax 18 Local wages, tips, etc 28890.00 GA 3275346-XR 1479.08 30814423705F001 34320.00 1758.29 VA

Form W-2 Wage and Tax Statement

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 impose	off you if this income is taxable and you fail	
d Control					Void	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service			
0035-18	8100061	- 00	00000060	-		APPTR	ICS LLC				lo. 1545-0008		
b Employ	/er's identificat	ion numb	er a Employee	s social security nu	Imber	4555 M	ANSELL ROA		MODE				
81-44	423705		856-	-58-4404			RETTA GA 3		LOOK	1 Wage	es, tips, other compensation	2 Federal Income tax withheld	
13 Stat	tutory	Reti	ement	Third-party		ALFIA	KETTA UA 5	0022					
Empl		plan		sick pay						3 Socia	al Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12 14 Other			e Employee's name, address, and ZIP code				5 Medicare wages and tips 6		6 Medicare tax withheld				
						HAREN	JDRA VARMA	A RUDRA	RAJU	7 Social Security tips 8 Allocated Tips		8 Allocated Tips	
						13653 8	TRATFORD	GLEN PL					
						HERNI	DON VA 20171	1		10 Dep	endent care benefits	11 Nonqualified plans	
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15 State	Employ	er's state		16 State wages,	tine etc		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name	
				I o ordre wages,			i / State income tax		To Local wayes, tips, etc.		is Local income tax	20 Locality naifie	
WI	036-102	29594	553-02	1	1	3500.00		463.19					
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Form W-2 Wage and Tax Statement 2020

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

c Employer's name, address, and ZIP code d Control number Void Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 0035-18100061 000000060-APPTRICS LLC b Employer's identification number a Employee's social security number 4555 MANSELL ROAD 3RD FLOOR 1 Wages, tips, other compensation 2 Federal Income tax withheld 81-4423705 856-58-4404 ALPHARETTA GA 30022 71710.00 9344.25 Retire plan 13 Statutory Employee Third-party sick pay 3 Social Security wage 4 Social Security tax withh 13200.00 818.40 12 See Instrs. for Box 12 14 Othe e Employee's name, address, and ZIP code 5 Medicare wages and tips 6 Medicare tax withheld 13200.00 191.40 7 Social Security tips HARENDRA VARMA RUDRARAJU 8 Allocated Tips 13653 STRATFORD GLEN PL HERNDON VA 20171 10 Dependent care benefits 11 Nonqualified plans Verification Code 15 State Employer's state I.D. No 16 State wages, tips, etc 19 Local income tax 20 Locality name 17 State income tax 18 Local wages, tips, etc 28890.00 1479.08 GA 3275346-XR VA 30814423705F001 34320.00 1758.29

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 hox 2 shows an amount or if you are eligible for any credit. Emmed income credit (BC), You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The annount of credit is based on income and framily size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your avissment income is more than the specified amount for 2020 or if income is carned for services provided while you were an immate at a penal institution. For 2020 in come hims and more information, vist www srs. gov/ETIC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return.

Also see Pub. 590, taiment income creater, sur lace una to more una to more una to the second of the second Service and the service of the servi personal control of the Control of Cont

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a what is the 30x down the section of 30x down the section 403x down to report tips on the labeled in bases 1, 3, 5, or 7. For information on how to report tips on your tax returns, see the instructions for Forms 1040 and 1040-SR. Your must file Form 4137, social Security and Medicare Tax on Unreported Tip Income, with you received a smaller amount. If you have records that you received a smaller amount is used in another control to a section 403x (b) (18)(D) tax-exempt organization plan. See the instructions for Forms 1040 and 1040-SR for how to deduct.

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5) K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. For form family and Medicare tax set his year because there is no longer a substantial risk of forfeiture of year. How included in box 1, 3, or 5) (and included in box 1), complete For

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrads (codes D, E, F, and S) and esignated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19.5001 (\$13.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.5 Box 12. The following list explains the codes shown in box 12. You may need this information to

Caccas decremary, consider mack alternation on the year assoring non-the current year. It in year as shown, the combinations are for the current year. A—Theollected 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.

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

 $C{\rm --Taxable}$ 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

B—Excite deferma to a section 401(k) early of a section 401(k) arrangement A a SIMPLE reitement 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

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employees only). See the instructions for Forms 1040 and 1040-SR. P—Excludable moving expense reimburscennesh paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5) Q—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 Ferra Care Insurance Contracts: S—Employee sharp reductive contributions under a section 408(p) SIMPLE plan (not included in box S—Employee sharp reductive contributions

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

securary wage base), and 3), see rub. 525, I axable and Nontaxable Income, for reporting requirements. W—Emphyser contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAc)

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-SR.

amount is also include in tox1. It is subject to an automal 20% tack puts interest. See the instructions for forms 100 and 100 SR. AA—Designated Roth contributions under a section 403(b) plan BB—Designated Roth contributions under a section 403(b) plan DD—Cox of employer-sponsored health coverage. The amount reported with Code DD is not take. BB—Designated Roth contributions under a section 403(b) plan. The amount reported with Code DD is not take. BB—Designated Roth contributions under a generation section 457(b) plan. This amount does not take. BB—Designated Roth contributions under a generation section 457(b) plan. The—Termitted Roth contributions under a section 83(b) (HI—Agergent deterrais under section 83(c) detoints and the close of the calendar year BB—Agergent deterrais under section 83(c) detoints and the close of the calendar year BRA contributions you may deduct. See Pub. 500-A. Contributions to Individual Retirement Arrangements (IRAs).

withhek unon dues, unitorm payments, health insurance premums deducted, nontaxable neome, educational assistance payments, or a member of the cregy'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

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

	ol number	0.00	00000000		Void		's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
0035-1	8100061	- 000	<u>)0000060-</u>			APPTR	PPTRICS LLC		OMB No. 1545-0008		
b Emplo	oyer's identification	on number	a Employee's	social security nu	mber	4555 M	ANSELL ROAD 3RD F	LOOR		2 Federal Income tax withheld	
81-4	423705		856-	58-4404					1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Sta		Retire		Third-party		ALPHA	ARETTA GA 30022				
Emp	oloyee	plan		sick pay					3 Social Security wages	4 Social Security tax withheld	
12 See	12 See Instrs. for Box 12 14 Other					e Employee	's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
						HARE	NDRA VARMA RUDRA	RAJU	7 Social Security tips	8 Allocated Tips	
						13653 \$	STRATFORD GLEN PL				
						HERNI	DON VA 20171		10 Dependent care benefits	11 Nonqualified plans	
									Verification Code		
15 State	Employe	r'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	
WI 036-1029594553-02			1	8500.00	463.19						

Form W-2 Wage and Tax Statement

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

	Control number Void 35-18100061 000000060-			Void	c Employer's name, address, and ZIP code APPTRICS LLC					Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number		mber	1555 M	4555 MANGELL BOAD 2DD ELOOD									
81-4423	3705	856-58-4404			4555 MANSELL ROAD 3RD FLOOR ALPHARETTA GA 30022			1 Wage	s, tips, other compensation 71710.00	2 Federal Income tax withheld	1 9344.25		
13 Statutory Employee		Retirement Third-party plan sick pay					50022		3 Social	I Security wages	4 Social Security tax withheld		
											13200.00		818.40
12 See Instrs. for Box 12 14 Other			e Employee's name, address, and ZIP code					are wages and tips	6 Medicare tax withheld				
											13200.00		191.40
						HARENDRA VARMA RUDRARAJU 13653 STRATFORD GLEN PL				7 Social	I Security tips	8 Allocated Tips	
						HERNDON VA 20171				10 Depe	endent care benefits	11 Nonqualified plans	
										Verif	ication Code		
15 State Employer's state I.D. No. 16 State wages, tips, etc.				17 State income tax	c	18 Local wages, tips, etc.		19 Local income tax	20 Locality name				
GA 3275346-XR 28		8890.00		1479.08									

Form W-2 Wage and Tax Statement 2020

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

d Control number Void		c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service							
0035-181000	61 000	0000060-			APPTR	ICS LLC			lo. 1545-0008				
b Employer's ident	fication number	a Employee's	social security nu	mber	4555 MANSELL ROAD 3RD FLOOR								
81-442370	5	856-	58-4404		- ALPHARETTA GA 30022			1 Wag	es, tips, other compensation 71710.00	2 Federal Income tax withhel	a 9344.25		
13 Statutory Employee	Retire plan	ment	Third-party sick pay					3 Soci	al Security wages	4 Social Security tax withhel	d		
									13200.00		818.40		
12 See Instrs. for Box 12 14 Other			e Employee	's name, address, and ZIP code		5 Medi	care wages and tips	6 Medicare tax withheld					
									13200.00		191.40		
				HAREN	NDRA VARMA RUDR	ARAJU	7 Soci	al Security tips	8 Allocated Tips				
				13653 \$	STRATFORD GLEN P	Ľ							
			HERNDON VA 20171				endent care benefits	11 Nonqualified plans					
								Ver	fication Code				
15 State En	ployer'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			
VA 3081	4423705	5001		34	4320.00	1758.2)						

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. Emmed income credit (BC), 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 children could qualify for a smaller credit. You and any qualifying children must have valid social institution. For 2020 or if income is earned for services provided while you were an immate at a peak institution. For 2020 or of in known is done information, vist wow stress you?EITC. Also see Pub. 596, Earned Income Credit. Any IIC that is more than your tax hability is refunded to you, but only if you file a tax return.

Also see Pub. 590, taimei informe e cour, sur la coura o more man particular o more man particular o 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. Service and the service of the servi 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-2 form our 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-sponsore the datch coverage (if stack 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 Tjer 1 railroad retirement (RKTA) taxes were withheld, you also may be able to claim a credit for the scccss against your federal neone tax. If you had more than calload employer and more than S5,012.70 in Tire 2 RRTA tax was withheld, you also may be able to claim actual instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

A series to use the series of the series of

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5) K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. For form family and Medicare tax set his year because there is no longer a substantial risk of forfeiture of year. How included in box 1, 3, or 5) (and included in box 1), complete For

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 EB) under all plans are generally limited to a total of \$19,500 (\$153,500 f you only have SIMPLE plans; \$22,5200 for section 40(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code far limited to \$19,500. Deferrals under code H are limited to \$7,000. How ever, 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 of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral 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 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 limit on Elective deferral lective deferral lective deferral lective 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 EL, your made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferral, consider 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

Caccas decremary, consider mack alternation on the year assoring non-the current year. It in year as shown, the combinations are for the current year. A—Theollected 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.

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

 $C{\rm --Taxable}$ 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

D—Elective deferrais to a section 401(k) cash or deferred arrangement. A a SIMPLE retirement account that is part of a section 401(k) arrangement E—Elective deferrais under a section 403(b) salary reduction agreement F—Elective deferrais under a section 408(k)(6) salary reduction SEP

2020

employees only). See the instructions for Forms 1040 and 1040-SR. P—Excludable moving expense reimburscennesh paid directly to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5) Q—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 Ferra Care Insurance Contracts: S—Employee sharp reductive contributions under a section 408(p) SIMPLE plan (not included in box S—Employee sharp reductive contributions

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

requireme

requirements. W—Emphyser contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSA)

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-SR.

amount is also include in tox1. It is subject to an automal 20% tack puts interest. See the instructions for forms 100 and 100 SR. AA—Designated Roth contributions under a section 403(b) plan BB—Designated Roth contributions under a section 403(b) plan DD—Cox of employer-sponsored health coverage. The amount reported with Code DD is not take. BB—Designated Roth contributions under a section 403(b) plan. The amount reported with Code DD is not take. BB—Designated Roth contributions under a generation section 457(b) plan. This amount does not take. BB—Designated Roth contributions under a generation section 457(b) plan. The—Termitted Roth contributions under a section 83(b) (HI—Agergent deterrais under section 83(c) detoints and the close of the calendar year BB—Agergent deterrais under section 83(c) detoints and the close of the calendar year BRA contributions you may deduct. See Pub. 500-A. Contributions to Individual Retirement Arrangements (IRAs).

withhekl, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments or a member of the creary's parsonage allowance and utilities. Raihzada emphysers use this box to report raiload retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the emphyser in raiload retirement (RRTA) compensation.

Form W-2 Wage and Tax Statement

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

0035-1		Void			c Employer's name, address, and ZIP code APPTRICS LLC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
81-4	Imployer's identification number a Employee's social security number 1-4423705 856-58-4404 Statutory Retirement Third-party Employee plan sick pay		4555 MANSELL ROAD 3RD FLO ALPHARETTA GA 30022	OOR	1 Wages, tips, other compensation 2 Federal Income tax withheld 71710.00 9344.2 3 Social Security wages 4 Social Security tax withheld 13200.00 818.4					
12 See I	Instrs. for Box 12	14 Other			e Employee's name, address, and ZIP code HARENDRA VARMA RUDRAR 13653 STRATFORD GLEN PL HERNDON VA 20171	AJU	5 Medicare wages and tips 13200.00 7 Social Security tips 10 Dependent care benefits	6 Medicare tax withheld		
15 State WI	Employer's s		16 State wages,		17 State income tax 8500.00 463.19	18 Local wages, tips, etc.	Verification Code	20 Locality name		

Form W-2 Wage and Tax Statement 2020

d Control number Void X					X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number							1 Wage	es, tips, other compensation	2 Federal Income tax withheld			
13 Statutory Retirement Third-party Employee plan sick pay							3 Socia	al Security wages	4 Social Security tax withheld			
12 See Inst	strs. for Box 12	2 14	Other			e Employee's name, add	iress, and ZIP code		5 Medi	care wages and tips	6 Medicare tax withheld	
I									7 Socia	al Security tips	8 Allocated Tips	
1									10 Dep	endent care benefits	11 Nonqualified plans	
									Veri	fication Code		
15 State	Employe	er'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	
				1								

Form W-2 Wage and Tax Statement 2020

d Control number	1	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number					1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Retire	ment Third-party							
Employee plan	sick pay				3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12 14	4 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
					Verification Code			
15 State Employer's state I.I	D. No. 16 State wages	, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		