| 7. | γ | 08 000 | 10074 | |
|---|--|--|---|---|
| a Employee's SSN 132-85-6503 | b Employer identification nu 1 Wgs, tips, other compn | mber (EIN) 27-038 2 Fed inc tax withheld | 3 Social security wages | OMB No. 1545-0008 |
| C Employer's name, address, and ZIP code SMILEY RENOVATIONS, LLC | 51971.70 | 5413.00 | 51971.70 | Form W-2 |
| 808 ORCHARD WAY | 4 SS tax withheld 3.2-22.25 | 5 Medicare wages & tips 51971.70 | 6 Medicare tax withheld 753.59 | Wage and Tax |
| SILVER SPRING MD 20904-6234 | 7 Social security tips | 8 Allocated tips | 9 | Statement |
| d Control number | 10 Depdnt care benefits | 11 Nonqualified plans | 12a | 2020 |
| e Employee's name, address, and ZIP code Suff. | 13 | 14 Other | 12b | |
| REVATHI VEERLA | Statutory employee - | | 12c | Copy B To Be Filed with Employee's FEDERAL |
| 691 PULLMAN PLACE GAITHERSBURG MD 20877 | Retirement plan | | 12d | Tax Return This information is being furnished to the Internal Revenue Service. |
| 15 State Employer's state ID number 16 State wages, tips, etc 1 | Third-party sick pay 7 State income tax | 18 Local wages, tips, etc | 19 Local income tax | 20 Locality name |
| MD 13728632 | 3946.13 | | | |
| REV 12/22/20 QBDT | | | Depar | tment of the Treasury - I |
| | | number (EIN) 27 - 038 | 20071 | OND No. 1516 COOK |
| a Employee's SSN 132-85-6503 | b Employer identification r | Idiliber (Elit) | 3 Social security wages | OMB No. 1545-0008 |
| C Employer's name, address, and ZIP code SMILEY RENOVATIONS, LLC | 1 Wgs, tips, other compn 51971.70 | 2 Fed inc tax withheld 5413.00 | 51971.70 | Form W-2 |
| 808 ORCHARD WAY | 4 SS tex withheld 3222.25 | 5 Medicare wages & tips 51971.70 | 6 Medicare tax withheld 753.59 | Wage and Tax |
| SILVER SPRING MD 20904-6234 | 7 Social security tips | 8 Allocated tips | 9 | Statement |
| d Control number | 10 Depdnt care benefits | 11 Nonqualified plans | 12a | 2020 |
| e Employee's name, address, and ZIP code Suff. | 13 Statutory employee. | 14 Other | 12b | Copy 2 To Be |
| REVATHI VEERLA | | | 12c | Filed With Employee's State |
| 691 PULLMAN PLACE GAITHERSBURG MD 20877 | Retirement plan | | 12d | City, or Local Income Tax Return. |
| 13 State Employer's state to No. | Third-party sick pay 17 State income tax 3946.13 | 18 Local wages, tips, etc | 19 Local income tax | 20 Locality name |
| MD 13728632 51971.70 | | | | -+ |
| REV 12/22/20 QBDT | | | | |
| a Employee's SSN 132-85-6503 | b Employer identification | | 89974 equired to file a tax return, a r | OMB No. 1545-0008 regligence penalty or |
| C Employer's name, address, and ZIP code SMILEY RENOVATIONS, LLC | 1 his information is being ful other sanction may be impo | rnished to the IRS. If you are rosed on you if this income is ta | xable and you fail to report it. 3 Social security wages | Form W-2 |
| 808 ORCHARD WAY | 51971.70 4 SS tax withheld | 5413.00 5 Medicare wages & tips | | Form VV-Z Wage and |
| SILVER SPRING MD 20904-6234 | 3222.25 7 Social security tips | 51971.70 8 Allocated tips | 753.59 9 | Tax |
| d Control No. | 10 Depont care benefits | 11 Nonqualified plans | 12a | Statement |
| | To Dopul Care Delients | 2 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 | | 2020 |

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee.) 691 PULLMAN PLACE Retirement plan . . 12d MD 20877 GAITHERSBURG Third-party sick pay 16 State wages, tips, etc 51971.70 19 Local income tax 20 Locality name 18 Local wages, tips, etc 17 State income tax 15 State Employer's state ID No. 3946.13 MD 13728632

Statutory employee.

e Employee's name, address, and ZIP code

REVATHI

VEERLA

14 Other

12b

12c