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 series and series an Service of the servic 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

\$220,000. 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 in 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 records the result that your early if a imorg on less than the allocated time. If Sec Tax and 137 to the second that you received a smaller amount. If you have records that show the actual amount of tips you received result that your actual if is imorg or less than the allocated time. Ike Form 4137 to actual amount of tips s. Use Form 4137 to

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this J—Nontaxable six k pay (information only, not included in boxss 1, 3, or 5) K=20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. Computer on your behalf (including amounts from a section 125 (carteering plan). Any amount over 50,000 also in included in box 1, 1, Chil and Dependent Care Expenses of the social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your incurred compensation or nongovernmental section 457(b) plant has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your incurred admediate control to box 1 if is a distribution made to you from a nonqualified deferred a compensation or nongovernmental section 457(b) plant has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your and and efferral and received a distribution in the same calendar year, mil same calendar year. If you made a deferral and received a distribution in the same calendar year, our are or will be age 62 by the need of the calendary exert, your employer should file Form SSA13, propring this mount.

**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 (\$15.5 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

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.

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

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) (TB—Perential deterrais under section 33(c) existion 83(c) (TB—Agergated detrains under section 33(c) existion 83(c) (TB—Agergated detrains under section 33(c) existion 83(c) (TBA contributions you may deduct. See Pub. 500-A. Contributions to Individual Retrement Arrangements (IRAs).

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.

empasyer in maroaa returement (RKIA) 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.

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 imposed on you if this income is taxable and you bail to report it.

d Control number Void				c Employer	s name, address, and ZIP code		Department of the Treasury - Internal Revenue Service				
0027-13075571 0000000010-			CLOUD EPA LLC			OMB No. 1545-0008					
b Employer's identification number a Employee's social security				mber	1800 B	YBERRY ROAD STE 90	19	1 Wages, tips, other compensation 2 Federal Income tax withheld			
	27-2820318		107-81-1347			HUNTINGDON VALLEY PA 19006		87696.00	14339.75		
13 Statutory Retireme Employee plan		ent Third-party sick pay						3 Social Security wages 87696.00	4 Social Security tax withheld 5437.15		
12 See I	12 See Instrs. for Box 12 14 C			4 Other			's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
									87696.00	1271.59	
						' MARRU YS VIEW CT		7 Social Security tips	8 Allocated Tips		
					COLUN	MBUS OH 43085		10 Dependent care benefits	11 Nonqualified plans		
									Verification Code		
15 State	Employer		No.	16 State wages			17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
ОН	53-04571	197			87	7696.00	2710.02				

## Form W-2 Wage and Tax Statement

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

		•													
d Control number Void					Void	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
0027-13075571 0000000010-						CLOUD EPA LLC									
b Employer's identification number a Employee's social security number					umber	1800 BYBERRY ROAD STE 909				1 Wages	1 Wages, tips, other compensation 2 Federal Income tax withheld				
27-2820318 107-			-81-1347		HUNTINGDON VALLEY PA 19006			1 thages,	87696.00						
	tutory loyee	Retiren plan	nent	Third-party sick pay					3 Social Security wages			4 Social Security tax withheld			
2 mployee plan											8	7696.00	5437.15		
12 See Instrs. for Box 12		2 14	14 Other			e Employee's name, address, and ZIP code			5 Medica	are wages and tips		6 Medicare tax withheld			
											8	7696.00		1271.59	
					VINAY MARRU				7 Social Security tips			8 Allocated Tips			
						689 KE	YS VIEW CT								
						COLUN	MBUS OH 43085			10 Deper	ndent care benefits		11 Nonqualified plans		
										Verific	cation Code				
15 State Employer's state			state I.D. No. 16 State wages, tip		, tips, etc	. 17 State income tax			18 Local wages, tips, etc.	19 Local income tax		ĸ	20 Locality name		
OH 53-0457197		719 7			8	7696.00	27	10.02							
						l									
	i					I									

## Form W-2 Wage and Tax Statement 2020

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

d Control number Void					Void	c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service			
			CLOUD EPA LLC 1800 BYBERRY ROAD STE 909				OMB No. 1545-0008						
b Employer's identification number a Employee's social security number							s, tips, other compensation	2 Federal Income tax withheld					
27-2820318 107-81-1347			HUNTINGDON VALLEY PA 19006			. Huge	87696.00		14339.75				
13 Statutory Retirement Third-party Employee   plan   sick pay							3 Social Security wages		4 Social Security tax withheld				
Linpioyee plan		olon puy						87696.00	· · · · · · · · · · · · · · · · · · ·	5437.15			
12 See Instrs. for Box 12 14 Other					e Employee	's name, address, and ZIP code		5 Medic	are wages and tips	6 Medicare tax withheld			
						VINAY MARRU 689 KEYS VIEW CT				87696.00		1271.59	
										Security tips	8 Allocated Tips		
						COLUN	MBUS OH 43085		10 Depe	ndent care benefits	11 Nonqualified plans		
									Verifi	cation Code			
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				
OH 53-0457197			87696.00		2710.02								