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 series and series and and and a series of the 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. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, 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. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Instructions for Employee

46-5248404

13 Statutory Employee

A set of the set of

\$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 ip 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 precisione that amount are if it is more one less than the allocated line. Itse Form 4137 to s Use Form 4137

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this J-amount on the wages line of your tax return. By filing Form 4137, your social security tips will be for 10. This amount includes the total dependent care benefits hat your employer paid to you or incurred on your behalf (including amounts from a section 125 (carteeria) plan). Any amount over 55,000 also is included in box 1. Complete Form 2441. Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts. Best 1. This amounts (si\) exported in box 1 if is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plant habecame taxable for social generative and the social section 457(b) plant habecame taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your rep fight to the deferred amount. This box should? The used if you had a deferral and a retrieved a distribution in the same calendar year, and the gave Cay by the end of the calend year, your employer should file Form SSA131, Employer Report of Special Wage Payments, with the Social Security Administration and give you oppy.

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 decremany, consider tracks information on use year association on the 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. $C{\rm --Taxable}$ 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—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—substantiate employee usings expense remnusciencits (unitable) M—Lnoelletted social security or RRTA ax on tatable 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—Nottaable 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

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) (HSAS). 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.

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 DD—Cost of employer-sponsored health coverage: The **amount reported with Code DD** is **not tavalite**. BE—Designated Roth contributions under governmental section 457(b) plan. This amount does not BE—Designated Roth contributions under 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.

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 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. c Employer's name, address, and ZIP code Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 Void 0942-16028015 0000100208-100000 MYTHRI CONSULTING LLC b Employer's identification number a Employee's social security number 8668 JOHN HICKMAN PARKWAY 2 Federal Income tax withh 1 Wages, tips, other comp 712-49-9526 91004.53 13415.07 SUITE 402 Retire plan Third-party sick pay 3 Social Security wages 4 Social Security tax withheld FRISCO TX 75034 91004.53 5642.28

12 See li	nstrs. for Box 12	14 Other		e Employee's na	ame, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
							91004.53	1319.5	7	
				KIRAN K	IAGARI	7 Social Security tips	8 Allocated Tips			
				UNIT 216	ń		10 Dependent care benefits	11 Nonqualified plans		
					AIRIE MN 55344					
				EDENTK	AINIE WIN 55544		Verification Code			
15 State Employer's state I.D. No. 16 State wages, tips, etc.					17 State income tax	18 Local wages, tips, etc.	I 19 Local income tax	20 Locality name		
		le I.D. NO.					19 Local income tax	20 Locality name		
MN	MN 3750749		9	004.53	5014.0	,				

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				
0942-16028015 0000100208-100000				MYTHRI CONSULTING LLC					OMB No. 1545-0008						
b Employer's identification number a Employee's s			s social security nu	ımber	8668 JOHN HICKMAN PARKWAY				1 Wages, tips, other compensation 2 Federal Income tax withheld						
46-5248404 712-4			49-9526		SUITE 402				i wages,	13415.07					
13 Statutory Retin Employee plan			nent	Third-party sick pay		FRISCO TX 75034				91004.53 3 Social Security wages			4 Social Security tax withheld		
					FRISCO IA /3034						91004.53	5642.28			
12 See Instrs. for Box 12			Other	•		e Employee's name, address, and ZIP code							6 Medicare tax withheld		
												91004.53		1319.57	
						KIRAN KUMAR GUNNAMMAGARI					Security tips		8 Allocated Tips	8 Allocated Tips	
						13055 I	DAHLIA CIR	CLE							
						UNIT 2	.16			10 Deper	ndent care bene	fits	11 Nonqualified plans		
						EDEN I	PRAIRIE MN	J 55344							
										Verific	cation Code				
15 State Employer's stat			ate I.D. No. 16 State wages, tips, etc.		17 State income tax		× .	18 Local wages, tips, etc.		19 Local incor	ne tax	20 Locality name			
MN 3750749		9			91004.		53 5014.								
						l									
				1											

Form W-2 Wage and Tax Statement 2020

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

d Control number Void					c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service			
				MYTHRI CONSULTING LLC				OMB No. 1545-0008					
b Employer's identification number a Employee's social security number				8668 JOHN HICKMAN PARKWAY				1 Wag	1 Wages, tips, other compensation 2 Federal Income tax withheld				
46-5248404 712-49-9526			SUITE 402					91004.53 13415					
13 Statutory Retirement Employee plan		ent			FRISCO TX 75034				3 Social Security wages 91004.53		4 Social Security tax withheld 5642.28		
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			
											91004.53		1319.57
						KIRAN KUMAR GUNNAMMAGARI 13055 DAHLIA CIRCLE				7 Soci	al Security tips	8 Allocated Tips	
						UNIT 216 EDEN PRAIRIE MN 55344					endent care benefits	11 Nonqualified plans	
											Verification 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			
MN 3750749		9	1004.53		5014.00								