a Employee's SSN 885-40-7917	1 Wages	1Wages, tips, other compensation 2 Federal income tax withheld 57363.20 7573.86		a Employee's SSN 885-40-7917		1Wages, tips, other compensation 2 Federal income tax withheld 57363.20 7573.86		
OMB No. 1545-0008	3 Social	security wages 15043.2	4 Social security tax withheld 932.68	OMB No. 1545-0008	3 Social securi		4 Social security tax withheld	
b Employer identification nu	mber 5 Medica	are wages and tips	6 Medicare tax withheld	b Employer identification no	umber 5 Medicare wa	ges and tips	6 Medicare tax withheld	
27-3167155 c Employer's name, address	, and ZIP code	15043.2	0  218.13	27-3167155 c Employer's name, addres	s, and ZIP code	15043.20	218.13	
FORTE CONST 926 LINCOLN A HOLBROOK, N	RUCTIO VENUE			FORTE CONST 926 LINCOLN / HOLBROOK, N	TRUCTION ( AVENUE	CORP.		
				d Control number	7 Social sec	curity tips	8 Allocated tips	
e Employee's first name and initial Last name SUNDER P MANNEMA			Suff. A	e Employee's first name an	d initial	Last name	Suff.	
21 PATERSON S JERSEY CITY, N.	-			SUNDER 21 PATERSON S JERSEY CITY. N	P E	MANNEMALA	<u>.</u>	
f Employee's address and Z d Control number	7 Social se	ecurity tips	8 Allocated tips	-	d 7ID anda			
9 10 Dependent ca		ent care benefits	11 Nonqualified plans	f Employee's address an	Retirem	ent	Third-party	
12a .		14 Other	<u> </u>	employee ——	plan 10 Depende	nt care benefits	sick pay 11 Nonqualified plans	
		MY SDI	31.20					
12b		NY PFL	154.82	12a		14 Other NY SDI	31.20	
12c				12b		NY PFL	154.82	
12d				12c			134.02	
13 Statutory employee	plan	irement	Third-party sick pay	12d				
15 State Employer's state INY 273167		16 State wages, tip 573	s, etc. 17 State income tax 2781.46	15 State Employer's state NY 1 273167		6 State wages, tips 5736		
1				] [ ]				
18 Local wages, tips, etc. 1	9 Local income	e tax 20 Locality	name	18 Local wages, tips, etc.	19 Local income tax	20 Locality i	name	
Form W-2 Wage and Tax State		Copy B - 10 Be Filed W	Department of the Treasury-Internal Revenue Servic	. VV-Z	сору 2 -	To Be Filed With Employe	epartment of the Treasury-Internal Revenue Sen e's State, City, or Local Income Tax Retu	
a Employee's SSN 1 Wages, tips 885-40-7917		s, tips, other compensation 57363.2		a Employee's SSN 885-40-7917		other compensation 57363.20		
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c Employer's name, address	, and ZIP code		210.13	27-3167155 c Employer's name, addres	ss, and ZIP code	15043.20	<u>// 210.13</u>	
FORTE CONST 926 LINCOLN A HOLBROOK, N	VENUE	N CORP.		FORTE CONS 926 LINCOLN HOLBROOK, N	AVENUE	CORP.		
e Employee's first name and SUNDER 21 PATERSON S JERSEY CITY, N.	 T	Last name P MANNEMAL	Suff.	e Employee's first name an SUNDER 21 PATERSON S JERSEY CITY. N	P.	ast name MANNEMALA	Suff.	
f Employee's address and Z d Control number	IP code 7 Social se	acurity tine	8 Allocated tips	1	f Employee's address and ZIP code d Control number 7 Social security tips 8 Allocated tips			
			·					
9	10 Depend	ent care benefits	11 Nonqualified plans	9	10 Dependent ca		11 Nonqualified plans	
12a		14 Other NY SDI	31.20	12a		14 Other	21.20	
12b		NY PFL	154.82	12b		NY SDI	31.20	
12c		INT FFL	134.02	12c		. NY PFL	154.82	
12d				12d		1		
13 Statutory employee	Reti	irement	Third-party sick pay	13 Statutory employee	Retireme plan	nt 🔲	Third-party sick pay	
15 State Employer's state INY   273167	D number	16 State wages, tip		15 State Employer's state	e ID number 1	6 State wages, tips	s, etc. 17 State income tax	
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W-2 wage and I ax State	ment 2020	J Copy C - F	or EMPLOYEE'S RECORDS	Form <b>W-2</b> Wage and Tax St	atement 2020		Department of the Treasury-Internal Revenue Se	