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.

Earned innour credit (EIC). 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 châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the HEI fir your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an intante at a penal institution. For 2020 income limits and more information, vist www. ris. gov/EITC.

Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Asso see run. 396, garnete income creair. Any Eu. mar is more man your tax monity is returned to 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. 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, SSR, or money amount error reported to the SSA on Form W-2. Be use to get your copies of Form W-2 from your 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 annear at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such 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 Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than architection for the excess fairs your federal income tax. If you had more than or claim a credit for the excess against your federal more than S8.537.40 in stocial security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you also may be able to claim a credit for the excess against your federal more than 15.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the 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

0014-12020092

55-0909860

12 See Instrs. for Box 12

94892298

15 Sta

PA

Instructions for Empitoyee

Box 1. Einer this amount on the wages line of your tax return.

Box 2. Einer 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 89-99, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 89-99

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips she in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips she

\$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 by 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 your received arenal that impout new if it is improved less than the allocated time. Use Form 4137 to

14 Other PASUI

0000000084-0000PA

480-45-1237

Third-party sick pay

16 State wages, tips, et

62.56

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this Jamount on the wages line of your tax return. By filing Form 4137, your social security tps will be credited to your social security record (used to figure your benefits).

BOS 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) 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.

BOS 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan the became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your repright to the deferred amount. This box shouldfit be used if you had a deferral amount exceeding the same cakendar year, and the gave 2by the end of the cakendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a ror will be gave 2by the end of the cakendar year, your employer should file Form SSA-131.

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 return. Elective deferrals (codes D., E, F, and S) and designated Roth contributions (codes AA, BR, and EE) under all plans are generally limited to a total of \$19.500 (\$13.500 if you only live SIMPLE plans; \$22.500 for section 403(b) plans; if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19.500. Deferrals under code H are limited to \$70,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals with the subject to the coveral limit on elective deferrals. For code G, the limit on elective deferrals and such as the subject to the coveral limit on everal limit on elective deferrals. For code G, the limit on elective deferrals when the subject to the coveral limit on elective deferrals. For code G, the limit on elective deferrals and constructions of the subject to the coveral limit on elective deferrals. For code G, the limit on elective deferrals and constructions of the subject to the coveral limit must be included in incomes. See the instructions for Errors 1040 and 1040.183.

administrator for more information. Amounts in excess of the overall electric deferral limit must included in income. See the instructions for Forms 100 and 1040-SRs. 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 deferrals, consider these amounts for the year shown, not the current year. If no year is

shown, the contributions are for the current year. A—Uncollected 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.

 $\textbf{C} — Taxable\ cost\ of\ group-term\ life\ insurance\ over\ \$50,000\ (included\ in\ boxes\ 1,\ 3\ (up\ to\ social\ security\ wage\ base),\ and\ 5)$ 

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under

a SIMPLE retirement 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) 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)

LP—substantance employee toolsness expense remonstreaments (nontanable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over

\$50,000 (former employees only). See the instructions for Forms 1040 and 1040-SR.

N—Uncollected Medizare 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—Exchadable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1.3, 0.5 to)

Q—Nontastable onmbat 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-Term Care Insurance Contracts.

S—Employees and prediction contributions under a section 408(p) SIMPLE plan (not included in box S—Employees allay reduction contributions 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 

qurements.

—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 to A-X

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-S8.

amount is also the clased in to 8x 1. It is volved to an automotical abs to the instructions for Forms 1040 and 1040-SR.

A.A.—Designated Roth contributions under a section 401(k) plan
B.—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not tracible.

B. Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply one outsthetone Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan.

The —Permitted benefits under a qualified small employer health ambusement arrangement
GG—Income from qualified equity grants under section 83(b)
H.—Aggregate defernals under section 83(b) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
RA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement
Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clercy's parsonage allowance and utilities. withheld, unnon dues, uniform payments, neath insurance premiums deducted, nontaxable income, cleductional assistance payments, or a member of the Cergy'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.

empayer in maroan returnent (RKIA) compensation.

Note: Keep Copy C of Form W. Cf or 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, inst in case there is a question about your work record and/or earnings in a particular year.

0.00 PA 231202

Form W-2 Wage and Tax Statement

Retire

2020

c Employer's name, address, and ZIP code

HARTFORD CT 06106

e Employee's name, address, and ZIP code

1250 PROVIDENCE RD

VENKATESH KAKI

APT 101B SECANE PA 19018

BIOINFO SYSTEMS LLC

10 COLUMBUS BLVD 10TH FLOOR

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 fall to report it.

Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 1 Wages, tips, other comp 104220.00 19716.99 3 Social Security wages 5 Medicare wages and tips 6 Medicare tax withheld 7 Social Security tips 8 Allocated Tips 10 Dependent care benefits 11 Nongualified plans Verification Code 18 Local wages, tips, etc 19 Local income tax 20 Locality name

# Form W-2 Wage and Tax Statement

state ID No

2020

2020

104220.00

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

104220.00

_											
					c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service			
0014-12020092 0000000084-0000PA				BIOINFO SYSTEMS LLC			OMB No. 1545-0008				
b Employer's identification number a Employee's social security number					mber	10 COLUMBUS BLVD 10TH FLOOR					
55-0909860 480-45			45-1237					1 Wages, tips, other compensation 104220.00		2 Federal Income tax withheld 19716.99	
13 Stat	tutory	Retirer	nent	Third-party		HAKIF	FORD CT 06106			104220.00	19/10.99
	loyee	plan		sick pay					3 Socia	l Security wages	4 Social Security tax withheld
12 See Ir	12 See Instrs. for Box 12 14 Other						's name, address, and ZIP code		5 Medi	care wages and tips	6 Medicare tax withheld
	PASUI 62.56										
						VENKATESH KAKI			7 Social Security tips		8 Allocated Tips
						1250 PROVIDENCE RD					
						APT 101B			10 Dependent care benefits		11 Nonqualified plans
					SECANE PA 19018			Verification Code			
45 01-1-	Forestern		N-	46 64-4	414		17 State income tax	40.11		19 Local income tax	20.1
	15 State Employer's state I.D. No. 16 State wages, tips, etc.					18 Local wages, tips, etc.	• • • •		20 Locality name		
PA	PA   94892298		104	1220.00	3199.54	10422	20.00	0.	00 PA 231202		

3199.54

# Form W-2 Wage and Tax Statement

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

d Control number Void					Void	c Employer	s name, address, and ZIP	code		Donard	Department of the Treasury - Internal Revenue Service			
0014-12020092 0000000084-0000PA				BIOINFO SYSTEMS LLC 10 COLUMBUS BLVD 10TH FLOOR					OMB No. 1545-0008					
b Employer's identification number a Employee's social security number								mber	-	•				
55-0909860 480-45-		45-1237					1 Wag	es, tips, other compensation 104220.00	2 Federal Income tax withheld					
	tutory	Retire	nent	Third-party		HARTFORD CT 06106					104220.00	19716.99		
Empl		plan		sick pay						3 Soci	al Security wages	4 Social Security tax withheld		
12 See In	strs. for Box 1		Other	•		e Employee's name, address, and ZIP code			5 Medi	care wages and tips	6 Medicare tax withheld			
	PASUI		62.56											
						VENK/	ATESH KAKI			7 Soci	al Security tips	8 Allocated Tips		
						1250 PI	1250 PROVIDENCE RD							
	1					APT 10	APT 101B			10 Dep	endent care benefits	11 Nonqualified plans		
							E PA 19018							
						SECANE FA 19016			Ver	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				
PA 94892298				104	1220.00		3199.54	1042	220.00	0.	00 PA 231202			

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.

Earned income credit (ECL) vom may be able to take the BEC for 2000 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 security numbers (SSNs). You can this the BEC if your investment income is more than the specified amount for 2020 or if moome is earned for services provided while you were an intimate at a penal institution. For 2020 in come limits and more information, vist www.sr.goveFTC.

Also see Pub. 596, Earned Income Credit. Any BEC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor 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 employer to correct your employer to the correct way and the state of the correct way and any statement, with the Social Security Administration (SSA) to correct any Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSR, or money amount error reported to the SSA on Form W-2. Be use to get your copies of Form W-2 from your 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 annear at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such 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 Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than architection for the excess fairs your federal income tax. If you had more than or claim a credit for the excess against your federal more than S8.537.40 in stocial security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you also may be able to claim a credit for the excess against your federal more than 15.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

### Instructions for Employee

Box 1. Enter this amount on the wages 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 899, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8999.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips show; in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abov \$200.000.

S200,000.

Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report upon 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 adequate 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 received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess gol

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Betieve deferral (codes D, E, F, and S) and designated Roth contributions (codes AA, Ba, and EE) under all plans are generally limited to a total of \$19,500 (\$313,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code Har elimited to \$7,000.

However, 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 amount is not subject to the overall limit on elective deferrals. For code G, the 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 levit we 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 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 deferrals, consider these amounts for the year shown, not 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

shown, the contributions are for the current year.

A—Uncollected social security or RR74 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.

security wage (user), and of )

Delective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retrement account that is part of a section 401(k) arrangement.

E—Bective deferrals under a section 403(b) salary reduction agreement

F—Bective deferrals under a section 408(k)(6) salary reduction SEP

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—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-Term Care Insurance Contracts.

S—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

 $\label{eq:condition} \begin{array}{ll} 1) \\ T-- Adoption \ benefits \ (not \ included \ in \ box \ 1). \ Complete \ Form \ 8839, \ Qualified \ Adoption \ Expenses, \ to \end{array}$ 

requarements.

W—Emphyer 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 (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 1040-954.

amount is also the clased in to 8x 1. It is volved to an automotical abs to the instructions for Forms 1040 and 1040-SR.

A.A.—Designated Roth contributions under a section 401(k) plan
B.—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not tracible.

B. Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply one outsthetone Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan.

The —Permitted benefits under a qualified small employer health ambusement arrangement
GG—Income from qualified equity grants under section 83(b)
H.—Aggregate defernals under section 83(b) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
RA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement
Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clercy's parsonage allowance and utilities.

withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the cterg's parsonage allow ance and utilities. Railroad emphyers 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

## 2020

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

d Control nui	umber				Void	c Employer's	s name, address, and ZIP code		Depart	ment of the Treasury - Internal Revenu	ua Sarvica	
0014-120	)20092	000	00000084	0000PA		BIOINFO SYSTEMS LLC				OMB No. 1545-0008		
b Employer's identification num $55-0909860$		numbe	umber a Employee's social security numb $480-45-1237$			10 COLUMBUS BLVD 10TH FLOOR					2 Federal Income tax withheld	
13 Statutory Re		Retire				HARTFORD CT 06106		3 Socia	104220.00 al Security wages	19716.99 4 Social Security tax withheld		
12 See Instrs. for Box 12			4 Other PASUI			e Employee	's name, address, and ZIP code		5 Medi	care wages and tips	6 Medicare tax withheld	
						VENKATESH KAKI 1250 PROVIDENCE RD			7 Socia	al Security tips	8 Allocated Tips	
						APT 101B			10 Dep	endent care benefits	11 Nonqualified plans	
							SECANE PA 19018			Verification Code		
15 State Employer's state I.D. No. 16 State wages, tips, etc.					1220.00	17 State income tax	18 Local wages, tips, etc.	20.00	19 Local income tax	20 Locality name		
PA 9	94892298	8			104	1220.00	3199.54	10422	20.00	0.	00 PA 231202	

#### Form W-2 Wage and Tax Statement 2020

	•						
d Control number		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		i	1 Wages, tips, other compensation	2 Federal Income tax withheld	
			_				
13 Statutory Retirement Third-party Employee plan sick pay			Ì	3 Social 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 Medicare tax withheld	
					7 Social Security tips	8 Allocated Tips	
					10 Dependent care benefits	11 Nonqualified plans	
					Verification Code		
15 State Employer's	s state I.D. No.	16 State wages, tips, et	c. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
1 1		I		1		1	

#### Form W-2 Wage and Tax Statement 2020

d Control number 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	
							r riagos, apo, other compensation	2 i dada moono ax manda	
13 Statutory Retirement Employee plan			nent Third-party sick pay				3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12 14 O		14 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 sta	te I.D. No.	16 State wages	, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	