



W-2 Wage and Tax Statement **2020**
 Copy C for employee's records. OMB No. 1545-0008

d Control number 000129 Dept. R8/BCT Corp. Employer use only **A**

c Employer's name, address, and ZIP code
BNS INTERNATIONAL INC
425 OLD NEWMAN RD SUITE 303
FRISCO, TX 75034

Batch #92602

e/f Employee's name, address, and ZIP code
AJAY MARKONDA
6850 PEACHTREE DUNWOODY RD
APT 938
ATLANTA, GA 30328

b Employer's FED ID number **46-2968515** a Employee's SSA number **XXX-XX-7182**

1 Wages, tips, other comp. **93292.75** 2 Federal income tax withheld **14590.71**

3 Social security wages **93292.75** 4 Social security tax withheld **5784.15**

5 Medicare wages and tips **93292.75** 6 Medicare tax withheld **1352.74**

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

14 Other 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick pay

15 State GA Employer's state ID no. **3140407-WK** 16 State wages, tips, etc. **93292.75**

17 State income tax **4772.12** 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted, as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	GA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	93,292.75	93,292.75	93,292.75	93,292.75
Reported W-2 Wages	93,292.75	93,292.75	93,292.75	93,292.75

2. Employee Name and Address.

AJAY MARKONDA
6850 PEACHTREE DUNWOODY RD
APT 938
ATLANTA, GA 30328

© 2020 ADP, Inc.

W-2 Wage and Tax Statement **2020**
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

d Control number 000129 Dept. R8/BCT Corp. Employer use only **A**

c Employer's name, address, and ZIP code
BNS INTERNATIONAL INC
425 OLD NEWMAN RD SUITE 303
FRISCO, TX 75034

b Employer's FED ID number **46-2968515** a Employee's SSA number **XXX-XX-7182**

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

14 Other 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
AJAY MARKONDA
6850 PEACHTREE DUNWOODY RD
APT 938
ATLANTA, GA 30328

15 State GA Employer's state ID no. **3140407-WK** 16 State wages, tips, etc. **93292.75**

17 State income tax **4772.12** 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

Federal Filing Copy **W-2** Wage and Tax Statement **2020**

W-2 Wage and Tax Statement **2020**
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

d Control number 000129 Dept. R8/BCT Corp. Employer use only **A**

c Employer's name, address, and ZIP code
BNS INTERNATIONAL INC
425 OLD NEWMAN RD SUITE 303
FRISCO, TX 75034

b Employer's FED ID number **46-2968515** a Employee's SSA number **XXX-XX-7182**

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

14 Other 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
AJAY MARKONDA
6850 PEACHTREE DUNWOODY RD
APT 938
ATLANTA, GA 30328

15 State GA Employer's state ID no. **3140407-WK** 16 State wages, tips, etc. **93292.75**

17 State income tax **4772.12** 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

GA State Reference Copy **W-2** Wage and Tax Statement **2020**

W-2 Wage and Tax Statement **2020**
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

d Control number 000129 Dept. R8/BCT Corp. Employer use only **A**

c Employer's name, address, and ZIP code
BNS INTERNATIONAL INC
425 OLD NEWMAN RD SUITE 303
FRISCO, TX 75034

b Employer's FED ID number **46-2968515** a Employee's SSA number **XXX-XX-7182**

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

14 Other 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
AJAY MARKONDA
6850 PEACHTREE DUNWOODY RD
APT 938
ATLANTA, GA 30328

15 State GA Employer's state ID no. **3140407-WK** 16 State wages, tips, etc. **93292.75**

17 State income tax **4772.12** 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

GA State Filing Copy **W-2** Wage and Tax Statement **2020**