2020 W-2 and EARNINGS SUMMARY Imployee Reference Copy Wago and Tay Wago and Tay Out in instance Out in insert Jethics and Tay Out in insert Jethics and TAX WITHHELD BOX 04 OF W-2 MEDICARE TAX FED. INCOME 3.587.76 WITHHELD BOX 06 OF W-2 BOX 02 0" W .2 STATE INCOME TAX 754.15 SUI/SDI BOX 17 OF W-2 LOCAL INCOME TAX BO: 19 OF W-2 BOX 14 OF W-2 0.00

To change your employee W-4 profile information file a new W-4 with your payroll department

DURGA LAKSHMI NEELAPALA 2405 MARYLAND RD UNIT # 322 WILLOW GROVE, PA 19090

Social Security Number: XXX-XX-8487

356.19

0.00

© 2020 ADP. Inc

	2350					
3	Social security wage		4 Social	security	tax with 1523.0	
5	Medicare wages and	4.82 I tips	6 Medic	are tax w	thheld	02
7	2456	4.82	8 Alloca		356.1	19
	Social security tips					
9			10 Deper			
11	Nonqualified plans		12a See inc	tructions fo	39	.90
14	Other		12b D 1		1061 4728	.52
			12d 13 Stat em	p. Ret. plan		
15	State Employer's s	tate ID no		X		_
	PA 9517 6677			- 2	4564.	82
17	State income tax	4.15	18 Local	wages, ti	os, etc.	
19	Local income tax	14.15	20 Locali	ty name		
-						
1	Wages, tips, other of			al income	3587.	76
3	Social security wag			security		held 02
5	Medicare wages and 2456	1 tips 4.82	6 Medic	are tax w	thheld 356.	19
d	Control number 00004660 W9H	Dept	Corp. BC95	Emplo	yer use	
0	Employer's name, a	44		-		-114
	THE DEPOSITE CORPORATION 18301 BERMUI TAMPA, FL	V				
b	CORPORATION 18301 BERMUI TAMPA, FL	N DA GR 33647		vee's SS	A numbe	187
	CORPORATION 18301 BERMUI	N DA GR 33647	EEN DE	vee's SS	A numbe	er 187
7	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID 13-408640	N DA GR 33647	a Emplo	yee's SS XXX- ited tips	A numbe XX - 84	187 s
7	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID 13-408640	N DA GR 33647	a Emplo 8 Alloca 10 Deper	yee's SS XXX- ited tips	A numbo	187 18
7 9	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID 13-408640 Social security tips Nonqualified plans	N DA GR 33647	a Emplo 8 Alloca 10 Deper	yee's SS XXX- ited tips	A numbo XX - 84 benefit	187 18 18 18 18 18 18 18 18 18 18 18 18 18
7 9	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID: 13-408640 Social security tips	N DA GR 33647	a Emplo 8 Alloca 10 Deper	yee's SS XXX- ited tips	A numbo	s 12 .90 .52
7 9	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID 13-408640 Social security tips Nonqualified plans	N DA GR 33647	a Emplo 8 Alloca 10 Deper	yee's SS XXX- ited tips	A numbo XX-84 benefit as for bo 39	s 12 .90 .52
7 9	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID 13-408640 Social security tips Nonqualified plans	N DA GR 33647	a Emplo 8 Alloca 10 Deper 12a See I 12b D	yee's SS XXX- ted tips ident car instruction	A numbo XX-84 benefit as for bo 39 1061 4728	s 12 .90 .52
7 9 11	CORPORATION 18301 BERMUI TAMPA, FL : Employer's FED ID 13-408640 Social security tips Nonqualified plans	N GR GR 33647	a Emplo 8 Alloca 10 Deper 12a See C 12b D 12c DD 12d 13 Stat em	yee's SS XXX- ted tips adent car natruction	A numbo XX-84 benefit as for bo 39 1061 4728	s 12 .90 .52
11	CORPORATION 18301 BERMUI TAMPA, FL Employer's FED ID 5-06840 Social security tips Nonqualified plans Other Employee's name, s DURGA LAKSI 2405 MARYLAI UNIT # 322	NDA GR 33647 number 15	a Emplo 8 Alloce 10 Deper 12a See 12b D 12c DD 12d 13 Statem	yee's SS XXX- ted tips adent car- nstruction	A numbo XX-84 benefit as for bo 39 1061 4728	s 12 .90 .52
7 9 11	CORPORATION 18301 BERMUI TAMPA, FL Employer's FED ID 13-408645 Social security tipa Nonqualified plans Other Employee's name, a DURGA LAKSI 2405 MARVI	NDA GR 33647 number 15	a Emplo 8 Alloce 10 Deper 12a See 12b D 12c DD 12d 13 Statem	yee's SS XXX- ted tips adent car- nstruction	A numbo XX-84 benefit as for bo 39 1061 4728	s 12 .90 .52
7 9 11 14 e/l	CORPORATION 18301 BERMUI TAMPA, FL Employer's FED IO. 13 - 408646 Social security tips Nonqualified plans Other Employee's name, s DURGA LAKSI 2405 MARVIAUNIT # 322 WILLOW GRO' State Employer's s	NDA GR 33647 number 15	a Emplo 8 Alloce 10 Deper 12a See i 12b D 12c DD 12c DD 13 Stat em and ZIP coc ELAPA	ryce's SS XXX- ted tips alRet plan X le LA	A number XX - 84 benefit to see for bo 39 1061 4728 3ed party	187 s 12 .90 .52 .1'
7 9 11 14 e/l	CORPORATION 18301 BERMUI TAMPA, FL Employer's FED IO. 13 - 408646 Social security tips Nonqualified plans Other Employee's name, s DURGA LAKSI 2405 MARVIAUNIT # 322 WILLOW GRO' State Employer's s	NDA GR 33647 number 15	a Emple 8 Alloce 10 Depet 12a See i 12b D 12c DD 12d J 13 Stat em d ZIP coc ELAPA 1909	ryce's SS XXX- ted tips alRet plan X le LA	A number XXX-84 be benefit to	187 s 12 .90 .52 .1'
7 9 11 14 e/l	CORPORATION 18301 BERMUI TAMPA, FL Employer's FED ID. 13 - 40864C Social security tips Nonqualified plans Other Employee's name. a DURGA LAKSI 2405 MARVIAU NNIT 322 WILL # 323 WILL # 322 WILL # 323 WILL # 323 WILL # 323 WILL # 324 WILL # 325 WILL # 3	NDA GR DA GR	a Emplo 8 Alloce 10 Deper 12a See C C 12b D 12c DD 12d 13 Stat em d ZIP coc ELAPA 1909 16 State 18 Local	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	A number XXX-84 be benefit to	187 s 12 .90 .52 .1'

Employee Reference Copy

THE DEPOSITORY TRUST & CLEARING

Employer's name address and 7IB and

18301 BERMUDA GREEN DR

e/f Employee's name, address, and ZIP code DURGA LAKSHMI NEELAPALA 2405 MARYLAND RD UNIT # 322 WILLOW GROVE, PA 19090 b Employer's FED ID number 13-4086405 a Employee's SSA number XXX-XX-8487

1 Wages, tips, other comp. 2 Federal income tax withhele 23503.30

BC95

3587.76

0000004660 W9H

CORPORATION

TAMPA, FL 33647

	old and Detach Here	PAGE 01	OF 01				
1 Wages, tips, other co. 2350		l income tax withheld 3587.76	1 Wages, tips, other comp. 23503.30		2 Federal income tax withheld 3587.76		
3 Social security wages 2456		security tax withheld 1523.02	3 Social security	Social security wages 24564.82		4 Social security tax withheld 1523.02	
5 Medicare wages and 2456	tips 6 Medic	are tax withheld 356.19	5 Medicare wages and tips 24564.82		6 Medicare tax withheld 356.19		
d Control number 0000004660 W9H	Dept. Corp. BC95	Employer use only 3114	d Control number 0000004660 W9H	Dept	Corp. BC95	Employer use only 311	
THE DEPOSITO CORPORATION 18301 BERMUDI TAMPA, FL 33	RY TRUST &	CLEARING	o Employer's nar THE DEPOS CORPORATI 18301 BERM TAMPA, FL	ITORY TI	RUST &		
b Emplo r' ED ID no 1' 4086405	5	yee's SSA number XXX-XX-8487	b Employer's FE 13-408	6405		yee's SSA number XXX-XX-8487	
7 So al curity tips	8 Alloca	ted tips	7 Social security				
	10 Deper	dent care benefits	9		10 Dependent care benefits		
nqualified plans	12a C	39.90	11 Nonqualified pl	ans	12a C	39.90	
Other	12b D	1061.52	14 Other		12b D	1061.52	
	12c DD	4728.18	H		12c DD	4728.18	
	12d					le con le constant	
	13 Stat em	Ret. plan 3rd party sick pay	1		13 Stat en	P. Ret. plan 3rd party sick	
e/f Employee's name, ad DURGA LAKSH 2405 MARYLAN UNIT # 322 WILLOW GROV	MI NEELAPA D RD	LA	ef Employee's na DURGA LAI 2405 MARY UNIT # 322 WILLOW GF	KSHMI NE LAND RD	ELAPAL	.A	
15 State Employer's sta PA 9517 6677	te ID no. 16 State	wages, tips, etc. 24564 87	15 State Employe	r's state ID n	o. 16 State	wages, tips, etc. 24564.82	
17 State income tax	18 Local	wages, tips, etc.	17 State income tax 754.15		18 Local wages, tips, etc.		
19 Local income tax	20 Local	ty name	19 Local income tax		20 Locality name		
1A/_2 W	e Filing Co age and Ta Statement yee's State Income Ta	× 2020	W-2	State	and Ta		

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. Box 2. Enter this amount on the federal incor

Box 5. You may be required to report this amount on Form 8959, nal Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959 Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips

above \$200,000. Box 8. This amount is not included in box 1, 3, 5, or 7. Fo

Box 8. This amount is not included in box 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 Unreported Tip Income, with your income tax return to report at least the allocated bip 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 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 employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits). to your social security record (used to inguity your benefits).

Box 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) plain). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any staxole and nontaxable amounts

amounts.

Box 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, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give

vou a coov. you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deterrals (codes D. F., and S) and designated Rolh contributions (codes AA, BB, and EE) under all plans are generally limited to a cotal of \$19.500 (\$13.500 if you only have SIMPLE plans; \$22.500 for section 4030); 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 \$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 6, 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 elective deterral limit must be included in income. See the Instructions for Forms 1040 and

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.

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 agre 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-SB for

how to deduct J-Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K-20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. L-Substantiated employee business expense reimburser

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only the Instructions for Forms 1040 and 1040-SR. ner employees only). See

N—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.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) Q-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-Employee salary 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 compute any taxable and nontaxable amo

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements. W–Employer 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

— useriars unsuf a section 414A nonquarited 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% lax plus interest. See the Instructions for Forms 1040 and 1040-104. 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 reported with code DD is not taxable. ed health coverage. The amount EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF-Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH – Aggregate deferrals under section 83(i) 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 IRA 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 clergy'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. the employer in ratiocal reterement (IHM1A) 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.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL. STATE AND LOCAL/CITY INCOME TAX RETURNS.

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 fail to report it.

IMPORTANT NOTE:

In order to insure efficient processing. attach this W-2 to your tax return like this (following agency instructions):



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 don't 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 (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 the 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't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information visit www.irs.gov/EITC. See also 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.

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-2c 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 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-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 \$8,537.40 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 one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Department of the Treasury - Internal Revenue Service

Department of the Treasury - Internal Revenue Service

Department of the Treasury - Internal Revenue Service