VV-2	/age and Tax Statement	2020	W-2	Wage and T Statement	/City/Local Income Tax Re	THE RESERVE TO SERVE THE PARTY OF THE PARTY	St se filed with employ
Copy B to be filed with e Wages, tips, other comp. 10573	2 Federal Inc	come tax withheld 14953.49	1 Wages, tips, other co		ederal Income tax withheld 14953.	1 Wages, tips	
Social security wages	4 Social Secu	arity tax withheld 6830.73	3 Social security wage	110173.03	ocial Security tax withheld 6830.	3 Social secu	rity wages 110173
Medicare wages and tips 11017	6 Medicare		5 Medicare wages and		Medicare tax withheld 1597.	5 Medicare v	vages and tips 110173
Control number		mployer use only	d Control number	110173.03	Employer use only	d Control nu	
Employer's name, address, and AMERICAN FIDELITY P.O. BOX 25523 OKLAHOMA CITY OK	ASSURANCE C	0.	c Employer's name, a AMERICAN FI P.O. BOX 2550 OKLAHOMA C	ddress, and ZIP code DELITY ASSURA 23 ZITY OK 73125	NCE CO.	c Employer's AMERIC P.O. BO OKLAH	s name, address, and Zi CAN FIDELITY A DX 25523 OMA CITY OK 73
Employer's FED ID number	a Employee	's SSA number	b Employer's FED ID n	umber a l	mployee's SSA number	b Employer's	FED ID number 1500
73-0714500 Social security tips	743-76- 8 Allocated	's SSA number -9849 tips	73-0714500 7 Social security tips	1	743-76-9849 Allocated tips	73-0714 7 Social secu	500 rity tips
	10 Depende	nt care benefits	9	10	Dependent care benefits	9	
1 Nonqualified plans		uctions for box 12	11 Nonqualified plans		See instructions for box 12	11 Nonqualif	ied plans
4 Other	C 12b	35.16	14 Other	12		14 Other	
	D 12c	4433.25		12		.25	
	W 12d	1950.00		V 12		.00	
	DD	7316.28 let. plan 3rd party sick pay			D 7316. Rat emp Ret. plan 3rd party si	.28 ldk pary	
e Employee's name, address, ar VISHWENDER SAIDA 226 SUMMERSET LN ATLANTA GA 30328	nd ZIP code SURENDER	^	e Employee's name, VISHWENDER 226 SUMMERS ATLANTA GAS	address, and ZIP code SAIDA SUREND SET LN 30328		VISHWE 226 SUN	e's name, address, and in the same of the
15 State Employer's state ID GA 233376-YB	no. 16 State was	ges, tips, etc. 105739.78	15 State Employe GA 233376	r's state ID no. 16 6-YB	State wages, tips, etc. 105739	15 State	Employer's state ID no
GA 233376-YB							
7 State income tax 56	324.29	ges, tips, etc.	17 State income tax	5624 29	Local wages, tips, etc.	17 State inco	
						19 Local inco	
9 Local income tax	20 Locality n	ame	19 Local income tax	20	Locality name	19 Local Inco	me tax
Form W-2 Wage & Tax Statemer					Treasury-IRS OMB No. 1545	Form W-2 W	age & Tax Statement I
Copy C Wages, tips, other comp. 1057: Social security wages 1101:	39.78 4 Social Sec 73.03 6 Medicare 73.03 It	come tax withheld 14953.49 urity tax withheld 6830.73 tax withheld 1597.51 imployer use only	You can file y company's er feature you c Export to Tur the QR code https://turbc	rour U.S. federal mployee self-ser can log in to you boTax link. You or by typing this stax.intuit.com/i Summary section	and state taxes wit vice system. To tak "UltiPro portal, viev can also get started into your web brow affiliate/ultipaper on is included with	th TurboTax direct e advantage of to w your Form W-2 d with TurboTax of wser: your W-2 to hel	ctly from your his convenient 2, and click on t directly by scan p describe port
b Employer's FED ID number	a Employee	's SSA number -9849	1. The followin	g information refle	ects your final pay stat	ement plus employ	er adjustments t
73-0714500 7 Social security tips	8 Allocated						
)	10 Depende	nt care benefits	Gross Wages	ription \	Vages, Tips, Other Co. 114010.6		ial Security Wage 114010.63
11 Nonqualified plans		uctions for box 12	Less Exempt W		390.0	0	390.00
14 Other	C 12b	35.16	Less Deferred C		4433.2	5	
	D 12c	4433.25	Less Dependen				
	W 12d	1950.00	Less Sec 125 Less Excess Wa	ages	3447.6	0	3447.60
	DD	7316.28 tet, plan 3rd party sick pay	FORS EVICES AN	-g-5			
e Employee's name, address, at VISHWENDER SAIDA	nd ZIP code	X	Taxable Wage (Reported on Fo		105739.7 Box 1 of \		110173.03 Box 3 of W-
226 SUMMERSET LN ATLANTA GA 30328			2 Employee W		ige your employee W-	4 profile informatio	n file a new W-4
			Z. Employee v	/-4 Profile To char	3-1		II, tile a new 11-4
VISHWENDER SAIDA 226 SUMMERSET LN	nd ZIP code		(Reported on Fo	orm W-2)	Box 1 of V	W-2	Вох

State, City, Local Filing Copy

Federal Filing Copy

Form W-2 Wage & Tax Statement Dept. of the Treasury-IRS OMB No. 1545-0008

State, City, Local Filing Copy 2020 ge and room aterment are state / City/Local Income Tax Return ee's State/City/Local Income tax withheld 14953.49 1597.51 P code SSURANCE CO. 125 a Employee's SSA number 743-76-9849 8 Allocated tips JRENDER 10 16 State wages, tips, etc. ........ 20 Locality name lept. of the Treasury-IRS OMB No. 1545-0008

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ions in more detail.

hat comprise your W-2 statement

Earnings Description	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages
Gross Wages	114010.63	114010.63	114010.63
Less Exempt Wages	390.00	390.00	390.00
Less Deferred Comp	4433.25		
Less Housing/Transportation			
Less Dependent Care			
Less Sec 125	3447.60	3447.60	3447.60
Less Excess Wages			
Taxable Wages	105739.78	110173.03	110173.03
(Reported on Form W-2)	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2

with the payroll department

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