

Form W-2 Wage and Tax Statement 2020		7 Social security tips	1 Wages, tips, other compensation 4521.76	2 Federal income tax withheld 476.77		
c Employer's name, address, and ZIP code UNIVERSITY OF TEXAS, ARLINGTON PAYROLL SERVICES, BOX 19130 ARLINGTON TX 76019-0130		8 Allocated tips	3 Social security wages	4 Social security tax withheld		
		9	5 Medicare wages and tips	6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12		
e Employee's name, address, and ZIP code HIMANSHU AJAY SINGH 513 SUMMIT AVE APT 280 ARLINGTON TX 76013-7382		13 Statutory employee Retirement plan Third-party sick pay b Employer identification number (EIN) 75-6000121 a Employee's social security number 314-37-2990	14 Other	12b 12c 12d		
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy B-To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.
OMB No. 1545-0008

Dept. of the Treasury - IRS
Visit the IRS website at www.irs.gov/efile.

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.

Form W-2 Wage and Tax Statement 2020		7 Social security tips	1 Wages, tips, other compensation 4521.76	2 Federal income tax withheld 476.77		
c Employer's name, address, and ZIP code UNIVERSITY OF TEXAS, ARLINGTON PAYROLL SERVICES, BOX 19130 ARLINGTON TX 76019-0130		8 Allocated tips	3 Social security wages	4 Social security tax withheld		
		9	5 Medicare wages and tips	6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12		
e Employee's name, address, and ZIP code HIMANSHU AJAY SINGH 513 SUMMIT AVE APT 280 ARLINGTON TX 76013-7382		13 Statutory employee Retirement plan Third-party sick pay b Employer identification number (EIN) 75-6000121 a Employee's social security number 314-37-2990	14 Other	12b 12c 12d		
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

OMB No. 1545-0008

Dept. of the Treasury - IRS
Visit the IRS website at www.irs.gov/efile.

Form W-2 Wage and Tax Statement 2020		7 Social security tips	1 Wages, tips, other compensation 4521.76	2 Federal income tax withheld 476.77		
c Employer's name, address, and ZIP code UNIVERSITY OF TEXAS, ARLINGTON PAYROLL SERVICES, BOX 19130 ARLINGTON TX 76019-0130		8 Allocated tips	3 Social security wages	4 Social security tax withheld		
		9	5 Medicare wages and tips	6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12		
e Employee's name, address, and ZIP code HIMANSHU AJAY SINGH 513 SUMMIT AVE APT 280 ARLINGTON TX 76013-7382		13 Statutory employee Retirement plan Third-party sick pay b Employer identification number (EIN) 75-6000121 a Employee's social security number 314-37-2990	14 Other	12b 12c 12d		
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return

OMB No. 1545-0008

Dept. of the Treasury - IRS

Form W-2 Wage and Tax Statement 2020		7 Social security tips	1 Wages, tips, other compensation 4521.76	2 Federal income tax withheld 476.77		
c Employer's name, address, and ZIP code UNIVERSITY OF TEXAS, ARLINGTON PAYROLL SERVICES, BOX 19130 ARLINGTON TX 76019-0130		8 Allocated tips	3 Social security wages	4 Social security tax withheld		
		9	5 Medicare wages and tips	6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12		
e Employee's name, address, and ZIP code HIMANSHU AJAY SINGH 513 SUMMIT AVE APT 280 ARLINGTON TX 76013-7382		13 Statutory employee Retirement plan Third-party sick pay b Employer identification number (EIN) 75-6000121 a Employee's social security number 314-37-2990	14 Other	12b 12c 12d		
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return

OMB No. 1545-0008

Dept. of the Treasury - IRS