2020 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only

Corp. 001073 CLIF/QAL Employer's name, address, and ZIP code

FEDERAL SOFT SYSTEMS 3101 SW I ST SUITE 31 BENTONVILLE AR 72712

Batch #03197

e/f Employee's name, address, and ZIP code

KRANTHI MEDIKONDA 555 WEST MADISON STREET

APT# 1412

CHICAGO IL 60661

Employer's FED ID number a Employee's SSA number 81-0964194 XXX-XX-7117 Wages, tips, other comp. Federal income tax withheld 102821.41 18190.62 Social security wages 4 Social security tax withheld 102821.41 6374.93 5 Medicare wages and tips 6 Medicare tax withheld 102821.41 1490.91 Social security tips 8 Allocated tips

10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 13 Stat emp. Ret. plan 3rd party sick pay

15 State Employer's state ID no. 16 State wages, tips, etc. 81-0964194 000 7 102821.41 17 State income tax 18 Local wages, tips, etc. 5089.66 19 Local income tax 20 Locality name

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FEDERAL SOFT SYSTEMS INC 3101 SW I ST SUITE 31 BENTONVILLE AR 72712

Employer's name, address, and ZIP code

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KRANTHI MEDIKONDA

555 WEST MADISON STREET APT# 1412

CHICAGO IL 60661

15 State Employer's state ID no. 16 State wages, tips, etc. IL 81-0964194 000 7 17 State income tax 18 Local wages, tips, etc. 5089.66 19 Local income tax 20 Locality name

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. 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 | IL. State Wages, Tips, Etc. Box 16 of W-2 |
|---------------------|--|--|-----------------------------------|---|
| Gross Pay | 105,896.00 | 105,896.00 | 105,896.00 | 105,896.00 |
| Less Other Cafe 125 | 3,074.59 | 3,074.59 | 3,074.59 | 3,074.59 |
| Reported W-2 Wages | 102,821.41 | 102,821.41 | 102,821.41 | 102,821.41 |

2. Employee Name and Address.

KRANTHI MEDIKONDA 555 WEST MADISON STREET APT# 1412 CHICAGO IL 60661

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| 1 Wages, tips, other comp. 102821.41 | | 2 Federal income tax withheld 18190.62 | | | |
|--|-----------------------------------|--|--|----------|----------|
| 3 | 3 Social security wages 102821.41 | | 4 Social security tax withheld 6374.93 | | |
| 5 | Medicare wages and 1028 | d tips 21.41 | 6 Medicare tax withheld 1490.91 | | |
| d | Control number | Dept. | Corp. | Employer | use only |
| 00 | 01073 CLIF/QAL | | | A | 133 |
| c Employer's name, address, and ZIP code | | | | | |
| FEDERAL SOFT SYSTEMS INC | | | | | |

3101 SW | ST SUITE 31 BENTONVILLE AR 72712

| b | Employer's FED ID number 81-0964194 | a Employee's SSA number XXX-XX-7117 | | |
|-----|-------------------------------------|---|--|--|
| 7 | Social security tips | 8 Allocated tips | | |
| 9 | | 10 Dependent care benefits | | |
| 11 | Nonqualified plans | 12 a | | |
| 14 | Other | 12b | | |
| | | 12c | | |
| | | 12d | | |
| | | 13 Stat emp. Ret. plan 3rd party sick pay | | |
| -16 | Employee's name address | and ZID and | | |

e/f Employee's name, address and ZIP code

KRANTHI MEDIKONDA 555 WEST MADISON STREET APT# 1412 CHICAGO IL 60661

| | | Employer's state ID no. 81-0964194 000 7 | 16 State wages, tips, etc. 102821.41 |
|---|----------|---|---|
| | 17 State | income tax | 18 Local wages, tips, etc. |
| | | 5089.66 | |
| Ī | 19 Local | income tax | 20 Locality name |
| | | | |
| I | | IL.State Refe | erence Copy |

Wage and Tax Statement

| 1 | Wages, tips, other comp. | | | 2 Federal income tax withheld | | |
|----|-----------------------------------|-----------------|------------------------------------|--|----------|----------|
| | 102821.41 | | | | 18 | 190.62 |
| 3 | 3 Social security wages 102821.41 | | 4 | 4 Social security tax withheld 6374.93 | | |
| 5 | Medicare wages and | i tips 21.41 | 6 Medicare tax withheld 1490.91 | | | |
| d | Control number | Dept. | | Corp. | Employer | use only |
| 00 | 1073 CLIF/QAL | | | | A | 133 |
| _ | Formital and a | | | 71D | _ | |

Employer's name, address, and ZIP code

FEDERAL SOFT SYSTEMS 3101 SW I ST SUITE 31 INC BENTONVILLE AR 72712

| b | Employer's FED ID number | a Employee's SSA number | | | | |
|----|--------------------------|---|--|--|--|--|
| | 81-0964194 | XXX-XX-7117 | | | | |
| 7 | Social security tips | 8 Allocated tips | | | | |
| 9 | | 10 Dependent care benefits | | | | |
| 11 | Nonqualified plans | 12a | | | | |
| 14 | Other | 12b | | | | |
| | | 12c | | | | |
| | | 12d | | | | |
| | | 13 Stat emp. Ret. plan 3rd party sick pay | | | | |
| | | | | | | |

e/f Employee's name, address and ZIP code

KRANTHI MEDIKONDA 555 WEST MADISON STREET APT# 1412 CHICAGO IL 60661

| 15 State | Employer's state ID no. | 16 | State wages, | tips, etc. |
|----------|-------------------------|----|--------------|------------|
| IL | 81-0964194 000 7 | | | 102821.41 |
| 17 State | income tax | 18 | Local wages, | tips, etc. |
| | 5089.66 | | | |
| 19 Local | income tax | 20 | Locality nam | е |
| | | | | |

IL.State Filing Copy Wage and Tax

Statement

Copy 2 to be filed with employee's State Income Tax Return.