



W-2 Employee Reference Copy
Wage and Tax Statement
2020
OMB No. 1545-0008

Copy C for employee's records.

d Control number 000055	Dept. K7/FJR	Corp.	Employer use only A
----------------------------	-----------------	-------	------------------------

c Employer's name, address, and ZIP code
**S FORCE IT SOLUTION LLC
5048 TENNYSON PKWY STE 250
PLANO, TX 75024**

Batch #92859

e/f Employee's name, address, and ZIP code
**IKRAMUDDIN KHAJA
5048 TENNYSON PKWY
SUITE 250
PLANO, TX 75024**

b Employer's FED ID number 82-2702264	a Employee's SSA number XXX-XX-0112
1 Wages, tips, other comp. 14717.20	2 Federal income tax withheld 2081.45
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
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 Employer's state ID no.	16 State wages, tips, etc.
17 State income tax	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
Gross Pay	14,717.20	14,717.20	14,717.20
Reported W-2 Wages	14,717.20	0.00	0.00

2. Employee Name and Address.

**IKRAMUDDIN KHAJA
5048 TENNYSON PKWY
SUITE 250
PLANO, TX 75024**

© 2020 ADP, Inc.

1 Wages, tips, other comp. 14717.20	2 Federal income tax withheld 2081.45		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number 000055	Dept. K7/FJR	Corp.	Employer use only A
c Employer's name, address, and ZIP code S FORCE IT SOLUTION LLC 5048 TENNYSON PKWY STE 250 PLANO, TX 75024			
b Employer's FED ID number 82-2702264	a Employee's SSA number XXX-XX-0112		
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 IKRAMUDDIN KHAJA 5048 TENNYSON PKWY SUITE 250 PLANO, TX 75024			
15 State Employer's state ID no.	16 State wages, tips, etc.		
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

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

1 Wages, tips, other comp. 14717.20	2 Federal income tax withheld 2081.45		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number 000055	Dept. K7/FJR	Corp.	Employer use only A
c Employer's name, address, and ZIP code S FORCE IT SOLUTION LLC 5048 TENNYSON PKWY STE 250 PLANO, TX 75024			
b Employer's FED ID number 82-2702264	a Employee's SSA number XXX-XX-0112		
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 IKRAMUDDIN KHAJA 5048 TENNYSON PKWY SUITE 250 PLANO, TX 75024			
15 State Employer's state ID no.	16 State wages, tips, etc.		
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

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

1 Wages, tips, other comp. 14717.20	2 Federal income tax withheld 2081.45		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number 000055	Dept. K7/FJR	Corp.	Employer use only A
c Employer's name, address, and ZIP code S FORCE IT SOLUTION LLC 5048 TENNYSON PKWY STE 250 PLANO, TX 75024			
b Employer's FED ID number 82-2702264	a Employee's SSA number XXX-XX-0112		
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 IKRAMUDDIN KHAJA 5048 TENNYSON PKWY SUITE 250 PLANO, TX 75024			
15 State Employer's state ID no.	16 State wages, tips, etc.		
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

W-2 City or Local Reference Copy
Wage and Tax Statement
2020
OMB No. 1545-0008
Copy 2 to be filed with employee's City or Local Income Tax Return.