

Copy B To Be Filed with Employee's FEDERAL Tax Return.		2020 OMB No. 1545-0008	
a Employee's SSN 105-83-4900	1 Wages, tips, other comp. 9429.00	2 Federal income tax withheld 1032.00	
b Employer ID no. (EIN) 27-1761939	3 Social security wages	4 Social security tax withheld	
c Employer's name, address, and ZIP code MOXIE IT SOLUTIONS, INC. 44025 PIPELINE PLAZA SUITE #110 ASHBURN VA 20147		5 Medicare wages and tips	
d Control number		6 Medicare tax withheld	
e Employee's name, address, and ZIP code AMULYA BHARGAVI JUVVALA 575 W MADISON ST CHICAGO IL 60661		7 Social security tips	
8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans	
12a Code See inst. for box 12		13 Statutory employee	
14 Other Life In 9.20		12b Code	
15 State Employer's state ID number		12c Code	
16 State wages, tips, etc.		12d Code	
17 State income tax		Third-party sick pay	
IL 27-1761939 000		9429.00	
18 Local wages, tips, etc.		428.37	
19 Local income tax		20 Locality name	

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service.

Dept. of the Treasury - IRS

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.		2020 OMB No. 1545-0008	
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Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

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.

REV 12/09/20 QBDT

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employees).		2020 OMB No. 1545-0008	
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