Copy B To Be F FEDERAL Tax R	iled w eturn	vith Employee's	<b>2020</b> OMB No. 15	545-0008	Copy City,	y 2 To Be Fi or Local Inc	led W	ith Emp Tax Ret	loyee's State, urn.		<b>20</b> B No. 1545-0008
a Employee's SSN	1 Wag	ges, tips, other comp. 81183.96	2 Federal income	tax withheld 10928.00		oloyee's SSN	1 Wag	es, tips, oth	ner comp. 81183.96	2 Federa	l income tax withheld 10928.00
648-29-1425	3 Soc	ial security wages	4 Social security	tax withheld	648	-29-1425	3 Soci	al security	wages	4 Social	security tax withheld
<b>b</b> Employer ID no. (EIN) 81-0845325	5 Med	dicare wages and tips	6 Medicare tax w	ithheld		oyer ID no. (EIN) 0845325	5 Med	icare wage	s and tips	6 Medica	re tax withheld
c Employer's name, ad SAGGI SOLI	ldress, a UTIC	and ZIP code ONS INC				oloyer's name, ad .GGI SOLU					
25050 RID	ING	PLZ NUM 1306	53		25	050 RID	ING	PLZ N	TUM 13066	3	
SOUTH RIDING VA 20152				SOUTH RIDING			VA 20152				
d Control number				d Control number							
e Employee's name, ac NAGARAJA A 4071 MINEI GLEN ALLEI	ADDA RAL		PT #1A VA 230	Suff.	NA 40	oloyee's name, ac GARAJA A 71 MINEI EN ALLEI	ADDA RAL		de IGS LN AP'	Г #1A VA	Suff. 23060
7 Social security tips		8 Allocated tips	9		7 Soci	al security tips		8 Allocate	ed tips	9	
10 Dependent care bene	efits	11 Nonqualified plans	12a Code See	inst. for box 12	<b>10</b> Depe	endent care bene	efits	11 Nonqua	lified plans	<b>12a</b> Co	ode See inst. for box 12
13 Statutory employee	<b>14</b> O	ther	12b Code		13	employee	<b>14</b> Ot	her		<b>12b</b> Co	ode
, , ,			12c Code			, ,				<b>12c</b> Cd	ode
Retirement Plan Third-party sick pay			<b>12d</b> Code		Retireme Third-par	ent Plan rty sick pay				<b>12d</b> Co	ode
VA 30-81084	5325	5F-002 811	83.96	4041.00	VA	30-81084	5325	F-002	8118	3.96	4041.00
15 State Employer's st	tate ID i	number 16 State wages,	ips, etc. 17 State	e income tax	15 State	Employer's stat	e ID nur	nber	16 State wages, tip	s, etc.	17 State income tax
18 Local wages, tips, etc	C.	19 Local income tax	20 Locality nam	e	18 Loca	al wages, tips, etc	Э.	<b>19</b> Local ir	ncome tax	20 Locality	y name
Form W-2 Wage and Ta This information is being furni	x State	ment he Internal Revenue Service.	Dept. of	the Treasury - IRS	Form V	V-2 Wage and Ta	x Stater	nent			Dept. of the Treasury - IR

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.

Copy C. For EMPLOYEE'S RECORDS.

2020

Copy	C For EMI	PLOYEE'S RE	CORDS.	202			
(See	Notice to E	mployees).			3 No. 1545-0008		
a Empl	loyee's SSN	1 Wages, tips, of		2 Federa	income tax withheld		
C 1 0	-29-1425		81183.96		10928.00		
048-	-29-1425	3 Social security	wages	4 Social s	security tax withheld		
<b>b</b> Emplo	yer ID no. (EIN)						
0.1	0045305	5 Medicare wage	es and tips	6 Medica	re tax withheld		
8T-	0845325						
		ddress, and ZIP co UTIONS II					
25	050 RID	ING PLZ I	NUM 13066	3			
SO	UTH RID	ING		VA	20152		
<b>d</b> Cont	rol number						
	loyee's name, a GARAJA	ddress, and ZIP co ADDA	de		Suff.		
40	71 MINE	RAL SPRII	NGS LN AP	T #1A			
GL:	EN ALLE	N		VA	23060		
<b>7</b> Socia	al security tips	8 Allocat	ed tips	9			
<b>10</b> Depe	ndent care bene	efits 11 Nonqu	alified plans	<b>12a</b> Co	12a Code See inst. for box 12		
13		14 Other		12b Code			
Statutory employee				12c C	12c Code		
Retiremer	nt Plan			120 0000			
		12d Code		ode			
Third-part	y sick pay		1				
VA	30-81084	15325F-002	8118	3.96	4041.00		
15 State	Employer's sta	te ID number	16 State wages, tip	os, etc.	17 State income tax		
18 Loca	l wages, tips, et	c. 19 Local i	ncome tax	20 Locality name			

REV 12/22/20 QBDT

City or Local In		oloyee's State,	2020
City, or Local in	come Tax Ret		OMB No. 1545-0008
a Employee's SSN	1 Wages, tips, oth	her comp.	2 Federal income tax withheld
. ,		81183.96	10928.0
648-29-1425	3 Social security	wages	4 Social security tax withheld
<b>b</b> Employer ID no. (EIN)	]		
	5 Medicare wage	s and tips	6 Medicare tax withheld
81-0845325			
c Employer's name, a SAGGI SOL	ddress, and ZIP cod UTIONS IN	de VC	
25050 RID	ING PLZ N	NUM 13066	3
SOUTH RID	ING		VA 20152
d Control number			
e Employee's name, a		de	Suf
			- 111 -
4071 MINE		NGS LN AP	
GLEN ALLE	N		VA 23060
7 Social security tips	8 Allocate	ed tips	9
10 Dependent care ben	efits 11 Nonqua	alified plans	12a Code See inst. for box 12
		alified plans	
13	efits 11 Nonqua	alified plans	12a Code See inst. for box 12
		alified plans	
13		alified plans	12b Code
13 Statutory employee Retirement Plan		alified plans	12b Code
13 Slatutory employee Retirement Plan Third-party sick pay	14 Other		12b Code 12c Code 12d Code
13 Slatutory employee Retirement Plan Third-party sick pay			12b Code 12c Code
13 Statutory employee Retirement Plan Third-party sick pay VA 30-81084	14 Other 45325F-002	8118	12b Code 12c Code 12d Code 3.96 4041.0
13 Statutory employee Retirement Plan Third-party sick pay VA 30-8108	14 Other 45325F-002 tte ID number	8118 <b>16</b> State wages, tip	12b Code 12c Code 12d Code 3 . 96 4041 . 0 s, etc. 17 State income tax
13 Statutory employee Retirement Plan Third-party sick pay VA 30-81084	14 Other 45325F-002 tte ID number	8118 <b>16</b> State wages, tip	12b Code 12c Code 12d Code 3.96 4041.0
13 Statutory employee Retirement Plan Third-party sick pay VA 30-8108	14 Other 45325F-002 tte ID number	8118 <b>16</b> State wages, tip	12b Code 12c Code 12d Code 3 . 96 4041 . 0 s, etc. 17 State income tax