2020 W-2 and EARNINGS SUMMARY



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

R8/BCT 000130 Employer's name, address, and ZIP code

> BNS INTERNATIONAL 425 OLD NEWMAN RD SUITE 303 FRISCO, TX 75034

> > Batch #92602

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

ASHOK KUMAR UPPUTURI 2231 LIVE OAK ST COMMERCE, TX 75428

b	Employer's FED ID number 46-2968515	a Employee's SSA number XXX-XX-3470		
1	Wages, tips, other comp.	2 Federal income tax withheld		
	64872.00	9537.57		
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	p. 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 Box 5 of W-2

Gross Pav Reported W-2 Wages

64,872.00 64,872.00

Federal income tax withheld

4 Social security tax withheld

6 Medicare tax withheld

18 Local wages, tips, etc.

Copy

20 Locality name

State Reference

Statement

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

Wage and Tax

9537.57

64,872.00 0.00

64,872.00 0.00

2. Employee Name and Address.

ASHOK KUMAR UPPUTURI 2231 LIVE OAK ST COMMERCE, TX 75428

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Wages, tips, other comp

Medicare wages and tips

Social security wages

17 State income tax

19 Local income tax

64872.00

	security tax withheld	
6 Medicare tax withheld		
Corp.	Employer use only	
	Corp.	

BNS INTERNATIONAL INC 425 OLD NEWMAN FRISCO, TX 75034 RD SUITE 303

b	Employer's FED ID number 46-2968515	a Employee's SSA number XXX-XX-3470			
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	e/f Employee's name, address and ZIP code				

ASHOK KUMAR UPPUTURI 2231 LIVE OAK ST COMMERCE, TX 75428

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 Local	ity nam	е	
		Enc	loral	Eili	na ('Any		

ederal Filing Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

d Control number Dep 000130 R8/BCT		mployer use only
c Employer's name, address BNS INTERNAT 425 OLD NEW FRISCO, TX 7	TONAL ING	-
b Employer's FED ID numbe 46-2968515		SSA number (-XX-3470
7 Social security tips	8 Allocated ti	ps
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 ASHOK KUMAR UF 2231 LIVE OAK ST COMMERCE, TX 75	PUTURI	

1 Wages, tips, other c 648	omp. 72.00	2 Federal income tax withheld 9537.57			
3 Social security wage	es	4 Social security tax withheld			
5 Medicare wages and	d tips	6 Medicare tax withheld			
d Control number	Dept.	Corp.	Employer use only		
000130 R8/BCT					
Employer's name, a	ddress, ar	nd ZIP cod	е		
DNG 11175			1110		

BNS INTERNATIONAL 425 OLD NEWMAN FRISCO, TX 75034 RD SUITE 303

b	Employer's FED ID number 46-2968515	a Employee's SSA number XXX-XX-3470			
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 pa			

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

ASHOK KUMAR UPPUTURI 2231 LIVE OAK ST COMMERCE, TX 75428

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
'					-"	Locality Hame

or Local Reference Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return