2020 W-2 and EARNINGS SUMMARY



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

011427 BOST/7KK EIC

Employer's name, address, and ZIP code

REVEREIT LLC 45640WILLOW POND PLZ#200 STERLING VA 20164

Batch #01289

e/f Employee's name, address, and ZIP code VENKAT RATNAM CHELUKALA 1313 SPECTRUM IRVINE CA 92618

b	Emplo	yer's FED	ID number	а	Em	oloy	ee's SS	A numb	er
		01-083	2135			X	XX-XX	-2095	5
1	Wages	s, tips, oth	er comp.	2	Fed	eral	income	tax wit	hheld
			570.20						
3	Social	security v	vages	4	Soc	ial	security	tax witl	nheld
5	Medica	are wages	and tips	6	Med	licar	e tax wi	thheld	
7	Social	security t	ips	8	Allo	cate	d tips		
9				10	Depe	ende	nt care	benefit	S
11	Nonqu	alified pla	ns	12	a See	inst	ructionsfo	r box 12	
44	041			12	b				
14	Other			12	С				
		2.3	B MAPFML	12	d				
			13	Stat	emp	Ret. plan	3rd part	y sick pay	
15	State	Employer's	s state ID no	16	Stat	e w	ages, tip	s, etc.	
1	ΑN	WTH1076	3471-002					57	0.20
17	State	income tax		18	Loc	al w	ages, tip	s, etc.	
			28.51						
19	Local	income tax	(20 Locality name					
$\overline{}$				_					

Wages, tips, other comp. Federal income tax withheld Social security wages Social security tax withheld Medicare wages and tips 6 Medicare tax withheld d Control number Employer use only 011427 BOST/7KK EIC Employer's name, address, and ZIP code

REVEREIT LLC

45640WILLOW POND PLZ#200 STERLING VA 20164

b	Employer's FED ID number 01-0832135	a Employee's SSA number XXX-XX-2095					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a See instructions for box 12					
14	Other	12b					
	2.38 MAPFML	12c					
		12d					
		13 Stat emp Ret. plan 3rd party sick pay					
_/F	Employee's name address as	nd ZID code					

VENKAT RATNAM CHELUKALA 1313 SPECTRUM IRVINE CA 92618

15		Employer's st		16 State	wages,	tips, et	c.
M	ſΑ	WTH107634'	71-002			5	70.20
17	State	income tax		18 Local	wages,	tips, et	tc.
		2	28.51				
19	Local	income tax		20 Locali	ity 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	MA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	630.00	630.00	630.00	630.00
Less Other Cafe 125	59.80	59.80	59.80	59.80
Less Exempt Wages	N/A	570.20	570.20	N/A
Reported W-2 Wages	570.20	0.00	0.00	570.20

2. Employee Name and Address.

VENKAT RATNAM CHELUKALA 1313 SPECTRUM IRVINE CA 92618

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Wages, tips, other comp. 570.20			Federa	inco	me tax	withheld
3 Social security wages			4 Social security tax withheld			
5 Medicare wages and tips		6	Medica	re tax	withhe	eld
d Control number	Dept.		Corp.	Em	ployer	use only
011427 BOST/7KK				T	EIC	29
c Employer's name, address, and ZIP code						
REVEREIT LLC 45640WILLOW POND PLZ#200 STERLING VA 20164						

b	Employer's FED ID number 01-0832135	a Employee's SSA number XXX-XX-2095					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a					
14	Other	12b					
	2.38 MAPFML	12c					
		12d					
		13 Stat emp. Ret. plan 3rd party sick pay					

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

VENKAT RATNAM CHELUKALA 1313 SPECTRUM IRVINE CA 92618

15	State	Employer's	state ID	no. 16	State	wages,	tips,	etc.
M	ΙA	WTH10763	471-0	02				570.20
17	State	income tax		18	Local	wages,	tips,	etc.
			28.5	1				
19	Local	income tax		20	Local	ity nam	е	

MA.State Reference Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

1	1 Wages, tips, other comp. 570.20			Federa	l inco	me tax v	vithheld
3	3 Social security wages			4 Social security tax withheld			
5	5 Medicare wages and tips			6 Medicare tax withheld			
d	Control number	Dept.		Corp.	Er	nployer	use only
011427 BOST/7KK					T	EIC	29

c Employer's name, address, and ZIP code

REVEREIT LLC POND PLZ#200 45640WILLOW STERLING VA 20164

b	Employer's FED ID number	a Employee's SSA number				
	01-0832135	XXX-XX-2095				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a				
14	Other	12b				
	2.38 MAPFML	12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pay				
ı						

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

VENKAT RATNAM CHELUKALA 1313 SPECTRUM IRVINE CA 92618

	Employer's state ID no.	16	State wages, tips, etc.
MA	WTH10763471-002		570.20
17 State	income tax	18	Local wages, tips, etc.
	28.51		
19 Local	income tax	20	Locality name

MA.State Filing Copy Wage and Tax Statement

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