



W-2 Wage and Tax Statement
 Copy C for employee's records
 OMB No. 1545-0008
2020

d Control number 011427 BOST/7KK Dept. BOST/7KK Corp. T EIC 29 Employer use only

c 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 Employer's FED ID number 01-0832135 **a** Employee's SSA number XXX-XX-2095

1 Wages, tips, other comp. 570.20 **2** Federal income tax withheld

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 2.38 MAPFML **12b** **12c** **12d** **13** Stat emp **Ret. plan** **3rd party sick pay**

15 State MA **Employer's state ID no.** WTH10763471-002 **16** State wages, tips, etc. 570.20

17 State income tax 28.51 **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	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.

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Federal Filing Copy
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MA. State Reference Copy
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