Hartford Life & Acc Ins Co for FedEx Corporation PO BOX 14772 Lexington, KY 40512

If you have questions contact: TAX FORM HOTLINE
Phone: 866-854-9219

Dileep Vampada 7928 WHITE BLUFF LN APT#201 MEMPHIS, TN 38119

If you have questions contact: TAX FORM HOTLINE

Phone: 866-854-9219

Notice to Payee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you

tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return. Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the

and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than \$8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for payee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if

Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR. You must file Form 4137, Social Security and Medicare Tax on Unreported Tip

Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used

to figure your benefits). **Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from Box 11. Inis amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year, If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000. are limited to \$7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. A - Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B - Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C - Taxable cost of group-term life insurance over \$50,000 (included in boxes)

C - Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)
D - Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E - Elective deferrals under a section 403(b) salary reduction agreement

E - Elective deferrals under a section 403(b) salary reduction agreement
F - Elective deferrals under a section 408(k)(6) salary reduction SEP
G - Elective deferrals and employer contributions (including nonelective deferrals)
to a section 457(b) deferred compensation plan
H - Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See
the Instructions for Forms 1040 and 1040-SR for how to deduct.
J - Nontaxable sick pay (information only, not included in box 1, 3, or 5)
K - 20% excise tax on excess golden parachute payments. See the Instructions for
Forms 1040 and 1040-SR

Forms 1040 and 1040-SR.

L - Substantiated employee business expense reimbursements (nontaxable)

M - Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms

1040 and 1040-SR.

N - Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and

P - Excludable moving expense reimbursements paid directly to a member of the

U.S. Armed Forces (not included in box 1, 3, or 5)

Q - Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R - Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

and Long-Term Care Insurance Contracts.

S - Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T - Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

V - Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W - Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y - Deferrals under a section 409A nonqualified deferred compensation plan 2 - Income under a nonqualified deferred compensation plan that fails to satisfy

Z - Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount also is included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA - Designated Roth contributions under a section 401(k) plan

BB - Designated Noth contributions under a section 403(b) plan
BB - Designated Roth contributions under a section 403(b) plan
DD - Cost of employer-sponsored health coverage. The amount reported with
code DD is not taxable.
EE - Designated Roth contributions under a governmental section 457(b) plan. This
amount does not apply to contributions under a tax-exempt organization section
457(b) plan 457(b) plan.

FF - Permitted benefits under a qualified small employer health reimbursement

arrangement

GG - Income from qualified equity grants under section 83(i)
HḤ - Aggregate deferrals under section 83(i) elections as of the close of the

Hn - Aggregate deterrals under section 83(I) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A,

Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the depart of prepared allowers and utilities. Politered employers use this box

deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. in a particular year.

DEICCHED CTATEMENT

	REISSUED STATEN	MENT .
Copy B-To Be Filed V	Vith Payee's FEDERAL	Tax Year 2020
Tax Return.		OMB No. 1545-0008
a. Payee's social security number XXX-XX-1024	1 Wages, tips, other compensation 3,685.77	2 Federal income tax withheld 386.79
b. Payor ID number	3 Social security wages	4 Social security tax withheld
06-0838648	3,685.77	228.52
d. Control number	5 Medicare wages and tips	6 Medicare tax withheld
02615138	3,685.77	53.44
7 Social security tips	8 Allocated tips	
c. Payor's name, address, and ZIP Hartford Life and Accider PO Box 14772 Lexington, KY 40512	code nt Ins Co	

e. Payee's name, address, and ZIP code

Dileep Vampada 7928 WHITE BLUFF LN APT#201 MEMPHIS, TN 38119

10 Dependent care benefits	11 Nongualified plans	See instructions for box 12
To Dependent care benefits	11 Noriqualified plans	
		12a
13 Statutory payee	14 Other	12b
Retirement plan		12c
Third-party sick pay		12d
		12e
		12f
15 State/Payor's state ID	16 State wages, tips, etc.	17 State income tax
TN		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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

REISSUED STATEMENT				
Copy 2-To Be Filed With Payee's State, City, Tax Year 20				
or Local Income Tax	Return.	OMB No. 1545-0008		
a. Payee's social security number XXX-XX-1024	1 Wages, tips, other compensation 3,685.77	2 Federal income tax withheld 386.79		
b. Payor ID number	3 Social security wages	4 Social security tax withheld		
06-0838648	3,685.77	228.52		
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e. Payee's name, address, and ZIP Dileep Vampada 7928 WHITE BLUFF LN APT#201 MEMPHIS, TN 38119				
10 Dependent care benefits	11 Nonqualified plans	12a		
13 Statutory payee	14 Other	12b		
Retirement plan		12c		
Third-party sick pay		12d		
_		12e		
		12f		
15 State/Payor's state ID	16 State wages, tips, etc.	17 State income tax		
TN				
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

REISSUED STATEMENT

Copy C-For PAYEE'	S RECORDS. (see Notice	e Tax Year 2020
to Payee on back of		OMB No. 1545-0008
a. Payee's social security number XXX-XX-1024	1 Wages, tips, other compensation 3,685.7	_
b . Payor ID number	3 Social security wages	4 Social security tax withheld
06-0838648	3,685.7	7 228.5
d. Control number	5 Medicare wages and tips	6 Medicare tax withheld
02615138	3,685.7	7 53.44
7 Social security tips	8 Allocated tips	
e. Payee's name, address, and 2	ZIP code	
Dileep Vampada 7928 WHITE BLUFF I APT#201 MEMPHIS TN 38119		
7928 WHITÊ BLUFF I		See instructions for box 12
7928 WHITÊ BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits		
7928 WHITÊ BLUFF I APT#201 MEMPHIS, TN 38119	11 Nonqualified plans	12a 12b
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7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits	11 Nonqualified plans	12a 12b
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits Statutory payee Retirement plan	11 Nonqualified plans	12a 12b 12c
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits Statutory payee Retirement plan	11 Nonqualified plans	12a 12b 12c 12d 12e
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits Statutory payee Retirement plan	11 Nonqualified plans	12a 12b 12c 12d
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits 13 Statutory payee Retirement plan Third-party sick pay X	11 Nonqualified plans 14 Other	12a 12b 12c 12d 12e 12f
7928 WHITÊ BLUFF I APT#201 MEMPHIS, TN 38119 10 Dependent care benefits 13 Statutory payee Retirement plan Third-party sick pay	11 Nonqualified plans 14 Other	12a 12b 12c 12d 12e 12f

Form W-2 Wage and Tax Statement Department of the Treasury - Internal Revenue Service 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.

REISSUED STATEMENT

Department of the Treasury - Internal Revenue Service

Form W-2

Wage and Tax Statement

Copy 2-To Be Filed	with Payee's State, City,	Tax Year 2020
or Local Income Ta		OMB No. 1545-0008
. Payee's social security number XXX-XX-1024	1 Wages, tips, other compensation 3,685.77	2 Federal income tax withheld 386.79
. Payor ID number	3 Social security wages	4 Social security tax withheld
06-0838648	3,685.77	228.52
. Control number	5 Medicare wages and tips	6 Medicare tax withheld
02615138	3,685.77	53.44
Social security tips	8 Allocated tips	
Lexington, KY 40512 Payee's name, address, and 2	ZIP code	
Dileep Vampada 7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119	.N	
7928 WHITÊ BLUFF I APT#201	.N	12a
7928 WHITÊ BLUFF I APT#201 MEMPHIS, TN 38119		12a 12b
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119	11 Nonqualified plans	⊣
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 Dependent care benefits	11 Nonqualified plans	12b
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 Dependent care benefits Statutory payee Retirement plan	11 Nonqualified plans	12b 12c
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 Dependent care benefits Statutory payee Retirement plan	11 Nonqualified plans	12b 12c 12d
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 Dependent care benefits Statutory payee Retirement plan	11 Nonqualified plans	12b 12c 12d 12e
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 Dependent care benefits Statutory payee Retirement plan Third-party sick pay State/Payor's state ID	11 Nonqualified plans 14 Other 16 State wages, tips, etc.	12b 12c 12d 12e 12f 17 State income tax
7928 WHITE BLUFF I APT#201 MEMPHIS, TN 38119 Dependent care benefits Statutory payee Retirement plan Third-party sick pay Third-party sick pay	11 Nonqualified plans 14 Other	12b 12c 12d 12e
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Item	Date	Check Num	Group	Description	Amount	Contact Name	Phone
Box 1 (Wages, tips, other comp.)			GB-800		3,685.77		866-854-9219
Box 2 (Federal income tax withheld)			GB-800		386.79		866-854-9219
Box 3 (Social security wages)			GB-800		3,685.77		866-854-9219
Box 4 (Social security tax withheld			GB-800		228.52		866-854-9219
Box 5 (Medicare wages and tips)			GB-800		3,685.77		866-854-9219
Box 6 (Medicare tax withheld)			GB-800		53.44		866-854-9219