



Employee Reference Copy <b>W-2</b> Wage and Tax Statement <b>2020</b> Copy C for employee's records. OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only
000082	KB/DY2		16
c Employer's name, address, and ZIP code			
BINARY COMPUTER INTL CORP 50 CRAGWOOD RD S PLAINFIELD, NJ 07080 2433  Batch #91570			
e/f Employee's name, address, and ZIP code			
BHAVANA KASHIBHATLA 11048 GRANDE PINES CIRCLE APT 911 ORLANDO, FL 32821			
b Employer's FED ID number	a Employee's SSA number		
45-3614196	XXX-XX-6264		
1 Wages, tips, other comp.	2 Federal income tax withheld		
13800.00	1879.66		
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.	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 Wages Box 5 of W-2
Gross Pay	13,800.00	13,800.00	13,800.00
Reported W-2 Wages	13,800.00	0.00	0.00

2. Employee Name and Address.

**BHAVANA KASHIBHATLA**  
**11048 GRANDE PINES CIRCLE**  
**APT 911**  
**ORLANDO, FL 32821**

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Federal Filing Copy <b>W-2</b> Wage and Tax Statement <b>2020</b> Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008			

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19 Local income tax	20 Locality name		
State Reference Copy <b>W-2</b> Wage and Tax Statement <b>2020</b> Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp.	2 Federal income tax withheld		
13800.00	1879.66		
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5 Medicare wages and tips	6 Medicare tax withheld		
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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 and ZIP code			
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17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
City or Local Reference Copy <b>W-2</b> Wage and Tax Statement <b>2020</b> Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008			