Copy B To Be Filed With Employee's Federal Tax Return			2020	OMB No. 1545-0008	Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return				OMB No. 1545-0008			
a Control number	1 Wages, tips, other	r comp.	2 Federal income tax wi	thheld		ol number	1 Wages, tips, other	er comp.	2 Federal income tax	withheld		
	1	76078.02	98	14.34				76078.02	9	814.34		
	3 Social security w		4 Social security tax with				3 Social security w	ages	4 Social security tax w	vithheld		
b Employer ID number		0.00		0.00	b Empl	oyer ID number		0.00		0.00		
204697141	5 Medicare wages	and tips 0.00	6 Medicare tax withheld	0.00	2046	97141	5 Medicare wages	and tips 0.00	6 Medicare tax withhe	0.00		
c Employer's name, addres	s, and ZIP code				c Employer's name, address, and ZIP code							
First Soft Solutions, LLC 1100 Cornwall Road Suite 101 Monmouth Junctio, NJ 08852						First Soft Solutions, LLC 1100 Cornwall Road Suite 101 Monmouth Junctio, NJ 08852						
d Employee's social security 268431330	d Employee's social security number 268431330						d Employee's social security number 268431330					
e Employee's name, addres	s, and ZIP code				e Employee's name, address, and ZIP code							
SAI YASHWANTH N MORE 377 Athens Way Apt 308 Nashville, TN 37228					SAI YASHWANTH N MORE 377 Athens Way Apt 308 Nashville, TN 37228							
7 Social security tips	8 Allocated ti	ns	9 Advance EIC payme	ent	7 Socia	al security tips	8 Allocated ti	ns	9 Advance EIC payr	ment		
0.00 0.00				0.00		0.00		90	0.00			
10 Dependent care benefits 0.00 11 Nonqualified plans 0.00)		10 Dep	endent care benefits	11 Nonqualifi	ed plans				
12a DD	5402.65	13 Stat. Emp.	Ret. plan 3rd-par	ty sick pay	12a D	D	5402.65	13 Stat. Emp.	Ret. plan 3rd-p	arty sick pay		
12b		14 Other	ITAL	400.50	12b			14 Other	ΤΛΙ	400.50		
40	DENTA			168.52	40	DENTAL 120			168.52			
12c		VIS	ION	58.28	12c			VISIO	ON	58.28		
12d					12d							
TN		76078.02		0.00	TN			76078.02		0.00		
15 State Employer's State	ID# 16 State w	ages, tips, etc.	17 State income tax		15 State	Employer's State ID)# 16 State w	ages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local in	come tax	20 Locality name		18 Loca	I wages, tips, etc.	19 Local in	come tax	20 Locality name			
Form W-2 Wage and Tax 3 This information is being furn	Statement shed to the Internal Re	venue Service	Dept. of the	Treasury - IRS	Form W This info	-2 Wage and Tax St mation is being furnis	atement hed to the Internal Re	evenue Service	Dept. of the	ne Treasury - IRS		
Copy C for Employee Records			2020	OMB No. 1545-0008		Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return			2020	OMB No. 1545-0008		
a Control number	1 Wages, tips, other	r comp.	2 Federal income tax wi	thheld	a Contr	ol number	1 Wages, tips, other	er comp.	2 Federal income tax			

Copy C for Employee		202	0	OMB No. 1545-0008					
a Control number	1 Wag	ges, tips, other	2 Fe	Federal income tax withheld					
		7	6078.02		9814.34				
				4 Sc	4 Social security tax withheld				
b Employer ID number			0.00				0.00		
204697141	5 Medicare wages and tips			6 M	6 Medicare tax withheld				
	0.00				0.00				
c Employer's name, address.	and ZIF	code code							
First Soft Solution	ns, LL	_C							
1100 Cornwall Road									
Suite 101									
Monmouth Junctio, NJ 08852									
d Employee's social security 268431330	number								
e Employee's name, address SAI YASHWANT 377 Athens Way Apt 308 Nashville, TN			372	28					
7 Social security tips 0.00	8	8 Allocated tips 0.00			9 Advance EIC payment 0.00				
10 Dependent care benefits 0.00	1	11 Nonqualified plans 0.00							
_{12a} DD		5402.65	13 Stat. Emp.	Re	t. plan 3rd	d-party	y sick pay		
12b			14 Other		<u>-</u>				
120	120			NTA					
12c	VISIO			ON 58.28					
12d									
TN			76078.02			(0.00		
15 State Employer's State II)#	16 State wa	ages, tips, etc.	17	17 State income tax				
18 Local wages, tips, etc.		19 Local income tax			20 Locality name				

, ,,				_				
a Control number	1 Wages, tips, other comp.			2 Federal income tax withheld				
		7	6078.02	9814.34				
	3 Soc	cial security wa	ages	4 Social security tax withheld				
b Employer ID number			0.00		0.00			
204697141	5 Med	dicare wages a		6 Medicare tax withheld				
			0.00		0.00			
c Employer's name, address	, and ZIF	code						
First Soft Solution	ns, LL	_C						
1100 Cornwall R	oad							
Suite 101								
Monmouth Junct	io, NJ	l	088	52				
d Employee's social security 268431330	number							
e Employee's name, address	s, and ZIF	ode code						
SALYASHWANT	HNI	MORE						
377 Athens Way								
Apt 308								
Nashville, TN			372	28				
,								
7 Social security tips	18	Allocated tip	os	9 Advance EIC payment				
0.00	$-\!\!+\!\!$	0.00		0.00				
10 Dependent care benefits 0.00		11 Nonqualifie	ed plans					
		0.00	140 Otal Fare	Det elee	0-1			
_{12a} DD		5402.65	13 Stat. Emp.	Ret. plan	3rd-party sick pay			
12b			14 Other					
120			TIT OUT DEN	NTAL	168.52			
12c			VIS	ION 58.28				
12d								
TN			76078.02		0.00			
15 State Employer's State I	16 State wa	ages, tips, etc.	17 State income tax					
18 Local wages, tips, etc.	19 Local inc		20 Locality name					
		1						