Notice to Employee
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 do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned innour 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 credit is based on income and family size.

Workers without châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the HEI for your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an intante at a penal institution. For 2020 income limits and more information, vist www. ris. gov/EITC.

Also see 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.

Asso see Pub. 396, galmed income Creati. Any Ert, mar is more man your tax manury is returned 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 employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount correct reported to the SAs on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct to that early 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 wise the SSA websic are wown.SSA, gov.

Cost of employer-sponsored health coverage (if such osts is provided by the employer). The reporting in Rox IZ using Code DIO, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DIo is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than SS, 537.40 in social security and/or Ter 1 rairoad retirement (RRTA) taxes were withheld, you may be able to chim a credit for the excess against your federal more than (S). The arrival of the control of the control

Instructions for Employee

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 8999. Additional Medicare Tax. See the Instructions for Forms 1004 and 1004-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 to Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200.000.

SOURCE SET OF STATE AND ACT OF THE ADDRESS OF TOWN 15 AND ACT OF THE ADDRESS OF THE

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess gol

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Betieve deferral (codes D, E, F, and S) and designated Roth contributions (codes AA, Ba, and EE) under all plans are generally limited to a total of \$19,500 (\$313,500 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 Har elimited 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 levit we 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. Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 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.

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

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—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.

S—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

 $\label{eq:condition} \begin{array}{ll} 1) \\ T-- Adoption \ benefits \ (not \ included \ in \ box \ 1). \ Complete \ Form \ 8839, \ Qualified \ Adoption \ Expenses, \ to \end{array}$

compute any taxable and nontaxable amounts.

V—income from seers's of most active to your death of the control of the control

requarements.

W—Emphyer 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

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-954.

amount is also the clased in to 8x 1. It is volved to an automotical abs to the instructions for Forms 1040 and 1040-SR.

A.A.—Designated Roth contributions under a section 401(k) plan
B.—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not tracible.

B. Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply one outsthetone Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan.

The —Permitted benefits under a qualified small employer health ambusement arrangement
GG—Income from qualified equity grants under section 83(b)
H.—Aggregate defernals under section 83(b) 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
RA 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 cleary's parsonage allowance and utilities.

withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable neone, educational assistance payments, or a member of the Cergy'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.

									y C, for employ	,	máy be imposed	is being furnished to the Int ed to file a tax return, a negl on you if this income is tax	able and you fail t	
0072-1	072-18073392 0000632044-					c Employer's name, address, and ZIP code APPRIDAT SOLUTIONS LLC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number a Employee's social security number 45-4564681 718-42-7332 13 Statutory Retirement Third-party				mber	5655 PEACHTREE PARKWAY STE 207 NORCROSS GA 30092			1 Wages	s, tips, other compensation 105574.08	² Federal Income tax withheld 15124.95				
	loyee	plan	it	Third-party sick pay						3 Social	Security wages 105574.08	4 Social Security tax withh	6545.59	
C See I	nstrs. for Box 12 31.6	14 0 PRI GR	E-T OUP		87.23 31.68	JASHWANTH CHOWDARY KANDIMALLA				are wages and tips 105574.08 Security tips	6 Medicare tax withheld 8 Allocated Tips	1530.82		
			.PFL .PML	1.	112.78 215.14	1676 CARLYLE DRIVE APT H CROFTON MD 21114			10 Dependent care benefits		11 Nonqualified plans			
						CKOFT	ON WID 211	14		Verifi	cation Code			
15 State		mployer's state I.D. No. 16 State wages, tips, etc.		720 00 L	17 State income ta		18 Local wages, tips, etc.	1	19 Local income tax	20 Locality name				
MD MA						728.98 845.10		1607.62 3972.40						

Form W-2 Wage and Tax Statement

2020

2020

Copy B, to be filed with employee's FEDERAL tax return

											• •		
	d Control number Void 0072-18073392 0000632044-				c Employer's name, address, and ZIP code APPRIDAT SOLUTIONS LLC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
45-4 13 Sta	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			mber	5655 PEACHTREE PARKWAY STE 207 NORCROSS GA 30092				$ \begin{array}{c c} \text{1 Wages, tips, other compensation} & \text{2 Federal Income tax withheld} \\ 105574.08 & 15124 \\ \hline \text{3 Social Security wages} & \text{4 Social Security tax withheld} \\ 105574.08 & 6545 \\ \hline \end{array} $				
C 12 See I	Instrs. for Box 12 31	.68 PR GI BC M	other EE-T ROUP EBS APFL APML	31 1	35.00	JASHW 1676 CA APT H	e Employee's name, address, and ZIP code JASHWANTH CHOWDARY KANDIMALLA 1676 CARLYLE DRIVE APT H CROFTON MD 21114			7 Soci	icare wages and tips 105574.08 all Security tips sendent care benefits	6 Medicare tax withheld 8 Allocated Tips 11 Nonqualified plans	1530.82
15 State MD MA	Employer 1475031 454-564-	-	No.	16 State wages,	2	1728.98 3845.10	17 State income tax	1607.62 3972.40	18 Local wages, tips, etc.	•	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement

Copy 2, to be filed with employee's tax return for MD

I				
d Control number Void c Employer's name, address, and ZIP code 0072-18073392 0000632044- APPRIDAT SOLUTIONS LLC Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number a Employee's social security number 5655 PEACHTREE PARKWAY STE 207				
NORCROSS (1A 30092	15124.95			
13 Statutory Retirement Third-party Employee plan sick pay 3 Social Security wages 4 Social Security	4 Social Security tax withheld			
105574.08	6545.59			
12 See Instrs. for Box 12 14 Other e Employee's name, address, and ZIP code 5 Medicare wages and tips 6 Medicare tax	withheld			
C 31.68 PRE-T 87.23 105574.08	1530.82			
GROUP 31.68 JASHWANTH CHOWDARY KANDIMALLA 7 Social Security tips 8 Allocated Tip	os			
BCBS 3135.00 1676 CARLYLE DRIVE				
APT H 10 Dependent care benefits 11 Nonqualified	d plans			
	•			
CROFTON MD 21114 Verification Code				
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Localir	ity name			
MD 14750311 21728.98 1607.62				
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Notice to Employee
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 do not have to file a 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 (ECL) You may be able to take the BEC for 2000 if your adjusted gross income (AGI) is less than a certain amount. The amount of 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 this take the EUC if your investment income is more than the specified amount for 2020 or if moome is earned for services provided while you were an intamet at a penal institution. For 2020 in come limits and more information, vist we wis zeyovETTC.

Also see 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.

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Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSR, or money amount error reported to the SSA on Form W-2. Be use to get your copies of Form W-2 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 annear 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 S8.537.40 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 architection for the excess faints your federal more than S1.5012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the excess against your federal more than S1.5012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the structures for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

- 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 8999. Additional 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 show in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips abov \$200,000.

 Box 8. This amount is not included in the control of the

S200,000.

Box 8. This amount is not included in boxes 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 Increported Tip Income, with adequate your income tax return to report at least the allocated if paramount unkess you can prove with adequate your received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to your work record and or amings in a particular year.

figure the social security and Medicare tax owed on tips you didn't report to your empbyer. Enter this J.—Nontaxable six by pay (information only, not included in boxes 1, 3, or 5) amount on the wages line of your tax return. By filing Form 4137, your social security is will be credited to your social security record (used to figure your benefits).

K—20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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K—20% excise tax on excess gol

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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 levit we 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. Box 12. The following list explains the codes shown in box 12. You may need this information to

shown, the contributions are for the current year.

A—Uncollected social security or RR74 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.

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.

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

employees only). See the instructions for Forms 1040 and 1040-SR.

P—Exchable moving expense reimbursements paid drecily to a member of the U.S. Armed Forces (not included in boxes 1, 3, or 5)

O—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.

S—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box 8—Linghyees allay reductive contributions under a section 408(p) SIMPLE plan (not included in box

 $\label{eq:condition} \begin{array}{ll} 1) \\ T-- Adoption \ benefits \ (not \ included \ in \ box \ 1). \ Complete \ Form \ 8839, \ Qualified \ Adoption \ Expenses, \ to \end{array}$

requartments.

W—Emphoyer 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 (HSA) Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-954.

instructions for Forms 1040 and 1040-SR.

A.—Designated Roth contributions under a section 401(k) 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.

BE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under at accentral regular section 457(b) plan. This amount does not apply to contributions under a developed profit of the profit of t

withheld, unnon dues, uniform payments, neath insurance premiums deducted, nontaxable income, cleductional assistance payments, or a member of the Cergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medic are tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Form W-2 Wage and Tax Statement

2020

Copy 2, to be filed with employee's tax return for MA

		9	and rax	Otatement	2020	00pj <u>-</u> , .0	, 20 moa	with employee 3 tax ret			
d Control number 0072-18073392 0000632044-					c Employer's name, address, and ZIP code APPRIDAT SOLUTIONS	LLC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
		s social security number 42-7332 Third-party	5655 PEACHTREE PARKWAY STE 207 NORCROSS GA 30092			1 Wages, tips, other compensation 105574.08	² Federal Income tax withheld 15124.95				
Employee						3 Social Security wages 105574.08	4 Social Security tax withheld 6545.59				
12 See Instrs. C			14 Other PRE-T GROUP BCBS MAPFL MAPML	87.2 31.6 3135.0 112.7 215.1	JASHWANTH CHOWDA 1676 CARLYLE DRIVE APT H	RY KANDIM.	ALLA	5 Medicare wages and tips 105574.08 7 Social Security tips 10 Dependent care benefits Verification Code	6 Medicare tax withheld 1530.82 8 Allocated Tips 11 Nonqualified plans		
15 State MA 45	Employ 54-564		e I.D. No.	16 State wages, tips, e		18 Local was	ges, tips, etc.	19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2020

d Control number		Voi X	c Employer	's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer's identification number	r a Employee's soo	cial security number				1 Wages, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Retirement Third-party Employee plan sick pay						3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12 14 Other			e Employee	o's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
						7 Social Security tips	8 Allocated Tips	
						10 Dependent care benefits	11 Nonqualified plans	
						Verification Code		
5 State Employer's state	.D. No. 1	16 State wages, tips,	etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2020

d Contro		on number	a Employee'	e encial cacurity nu	Void X	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number					IIIDei				1 Wag	es, tips, other compensation	2 Federal Income tax withheld	
13 Statutory Retirement Third-party Employee plan sick pay						3 Soci	al Security wages	4 Social Security tax withheld				
12 See Ir	nstrs. for Box 12	14	Other			e Employee	's name, address, and ZIP code		5 Med	icare wages and tips	6 Medicare tax withheld	
									7 Soci	ial Security tips	8 Allocated Tips	
									10 Dep	pendent care benefits	11 Nonqualified plans	
									Ver	ification Code		
15 State	Employe	er's state I.C	J. No.	16 State wages,	, tips, etc.		17 State income tax	18 Local wages, tips, etc.		19 Local income tax	20 Locality name	