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 hox 2 shows an amount or if you are eligible for any credit. Emmed income credit (BC), You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The annount of credit is based on income and framily size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your avissment income is more than the specified amount for 2020 or if income is carned for services provided while you were an immate at a penal institution. For 2020 in come hims and more information, vist www srs. gov/ETIC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return.

Also see Pub. 590, taiment income creater, sur lace una to more una series and series an 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 name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2 form our 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-sponsore the datch coverage (if stack 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 Tjer 1 railroad retirement (RKTA) taxes were withheld, you also may be able to claim a credit for the scccss against your federal neone tax. If you had more than calload employer and more than S5,012.70 in Tire 2 RRTA tax was withheld, you also may be able to claim actual instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Instructions for Employee

A set of the set of

\$2200,000.
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 Uureported 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 you must received as maller 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 J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5) K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. K=20%, eccise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. For form family and Medicare tax set his year because there is no longer a substantial risk of forfeiture of year. How included in box 1, 3, or 5) (and included in box 1), complete For

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrads (codes D, E, F, and S) and esignated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19.5001 (\$13.500 (\$15.5 Box 12. The following list explains the codes shown in box 12. You may need this information to

Caccas decremary, consider mack alternation on the year assoring non-the current year. It in year as shown, the combinations are for the current year. A—Theollected 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.

 $C{\rm --Taxable}$ 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

B—Elective deferrals to a section 40(k) cash of a section 40(k) arrangement a SIMPLE reitement account that is part of a section 40(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—Excludable moving expense reimburscennesh paid directly to a member of the U.S. Armed Forces (not included in boxes 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 Ferra Care Insurance Contracts: S—Employee sharp reductive contributions under a section 408(p) SIMPLE plan (not included in box S—Employee sharp reductive contributions

1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to

requirements. W—Emphyser 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-SR.

amount is also include in tox1. It is subject to an automal 20% tack puts interest. See the instructions for forms 100 and 100 SR. AA—Designated Roth contributions under a section 403(b) plan BB—Designated Roth contributions under a section 403(b) plan DD—Cox of employer-sponsored health coverage. The amount reported with Code DD is not take. BB—Designated Roth contributions under a section 403(b) plan. The amount reported with Code DD is not take. BB—Designated Roth contributions under a generation section 457(b) plan. This amount does not take. BB—Designated Roth contributions under a generation section 457(b) plan. The—Termitted Roth contributions under a section 83(b) (TB—Perential deterrais under section 33(c) existion 83(c) (TB—Agergated detrains under section 33(c) existion 83(c) (TB—Agergated detrains under section 33(c) existion 83(c) (TBA contributions you may deduct. See Pub. 500-A. Contributions to Individual Retrement Arrangements (IRAs).

withhek unon dues, unitorm payments, health insurance premums deducted, nontaxable neome, educational assistance payments, or a member of the cregy'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.

Construction under a section 408(k)(6) salary reduction SEP
 G—Elective deferrals and employer contributions (including none-lective deferrals) to a section 457(b)
 deferred compensation plin
 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.
 How the section 450(b) salary reduction SEP
 Section 457(b)
 returns the section 450(b) salary reduction SEP
 Section 457(b)
 returns the section 450(b) salary reduction SEP
 Section 457(b)
 returns the section 450(b) salary reduction SEP
 Section 457(b)
 Section 457(b)

Form W-2 Wage and Tax Statement	2020	

Form W-2 Wage a	Ind Tax Statemen	t 2020	Сор	oy C, for employ	ree's records This information If you are require may be imposed	is being furnished to the Internal Revenue Served to file a tax return, a negligence penalty or o on you if this income is taxable and you fail to			
d Control number 0940-P4101288 000 b Employer's identification number	0016286-000730 a Employee's social security nu	СОМР	s name, address, and ZIP code JNNEL SOFTWARE GF	ROUP INC	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
58-2137105 13 Statutory Retires	368-61-8782 nent Third-party	103 MC	ORGANE LANE #102 SBORO NJ 08536		1 Wages, tips, other compensation 73216.50	2 Federal Income tax withheld 6170.83			
Employee plan	sick pay				3 Social Security wages 73216.50	4 Social Security tax withheld 4539.42			
12 See Instrs. for Box 12 DD 5318.88	Other	RUPES 2643 ST	s name, address, and ZIP code H DESHABOINA FEINER HOUSE		5 Medicare wages and tips 73216.50 7 Social Security tips 10 Dependent care benefits	6 Medicare tax withheld 1061.64 8 Allocated Tips			
		COLUN	ABUS OH 43219		10 Dependent care benefits 11 Nonqualified plans Verification Code				
15 State Employer's state I.D. No. 16 State wages, I DH 53-016487 0		tips, etc. 73216.50	17 State income tax 2276.92	18 Local wages, tips, etc.	19 Local income tax	20 Locality name			

Form W-2 Wage and Tax Statement

2020

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

d Control number Void			c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008							
0940-P4101288 0000016286-000730			COMPUNNEL SOFTWARE GROUP INC											
b Employ	/er's identificat	tion number	a Employee's	s social security nu	mber	103 MORGANE LANE #102								
50 21	37105		269	61-8782		105 100	105 MORGANE LAINE #102			1 Wage	s, tips, other compensation	2 Federal Income tax with		
						PLAINSBORO NJ 08536					73216.50		6170.83	
13 State Emple		Retirem plan	ient	Third-party sick pay						3 Socia	I Security wages	4 Social Security tax with	held	
	Employee plan sick pay									73216.50				
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					
DD 5318.88										73216.50		1061.64		
				RUPESH DESHABOINA				7 Social Security tips 8 Alloc		8 Allocated Tips	1001101			
					2643 STEINER HOUSE									
								10 Dep	endent care benefits	11 Nongualified plans				
				COLUMBUS OH 43219										
										Verit	lication Code			
						1								
I						L								
15 State					17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name				
OH	H 53-016487 0		73	3216.50 2276.92										
				1										

Form W-2 Wage and Tax Statement 2020

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

d Control number Void				c Employer's name, address, and ZIP code				Department of the Treasury - Internal Revenue Service					
0940-P4	0940-P4101288 0000016286-000730		COMPUNNEL SOFTWARE GROUP INC				OMB No. 1545-0008						
b Employ	er's identification nu	mber a	Employee's	social security nu	mber	103 MORGANE LANE #102							
58-2137105 368-		368-6	368-61-8782					1 Wag	es, tips, other compensation	2 Federal Income tax with	6170.83		
		etirement	+	Third-party		PLAINSBORO NJ 08536				73216.50		0170.85	
	13 Statutory Retirement Third-party Employee plan sick pay							al Security wages	4 Social Security tax with	nheld			
										73216.50		4539.42	
12 See In	strs. for Box 12	14 Ot	ther			e Employee	s name, address, and ZIP code		5 Med	icare wages and tips	6 Medicare tax withheld		
DD	5318.8	3								73216.50		1061.64	
				RUPESH DESHABOINA				al Security tips	8 Allocated Tips				
				2643 STEINER HOUSE									
			COLUMBUS OH 43219				pendent care benefits	11 Nonqualified plans					
						COLON	1000 011 (321)						
									Ver	ification 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 Locality name				
OH	53-016487	53-016487 0 7		7.	3216.50 2276.92								