## 2020 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement Copy C for employee's records. d Control number Corp. Employer use only

R8/BCT 000157 Employer's name, address, and ZIP code

> BNS INTERNATIONAL 425 OLD NEWMAN RD SUITE 303 FRISCO, TX 75034

> > Batch #92602

e/f Employee's name, address, and ZIP code

SAI SANDEEP PEDDI 550 LOWELL AVE **APT 12** 

CINCINNATI, OH 45220 Employer's FED ID number a Employee's SSA number 46-2968515 XXX-XX-5296 Wages, tips, other comp. Federal income tax withheld 4800.00 381.08 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 10 Dependent care benefits 12a See instructions for box 12 11 Nonqualified plans 12b 14 Other 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

13 Stat emp Ret. plan 3rd party sick pay

1	Wages, tips, other o	2 Federal income tax withheld 381.08			
3	Social security wage	4 Social security tax withheld			
5	Medicare wages and	6 Medica	re tax withhe	ld	
d	Control number Dept.		Corp.	Employer	use only
0.0	00157 R8/BCT				

Employer's name, address, and ZIP code

BNS INTERNATIONAL INC 425 OLD NEWMAN FRISCO, TX 75034 RD SUITE 303

b	Employer's FED ID number 46-2968515	a Employee's SSA number XXX-XX-5296
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
e/f	Employee's name address an	nd ZIP code

SAI SANDEEP PEDDI 550 LOWELL AVE APT 12 CINCINNATI, OH 45220

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

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. 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 Box 5 of W-2

Gross Pav Reported W-2 Wages 4,800.00 4,800.00

4,800.00 0.00

4,800.00 0.00

2. Employee Name and Address.

SAI SANDEEP PEDDI 550 LOWELL AVE APT 12 CINCINNATI, OH 45220

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1 Wages, tips, other co	mp. <b>0.00</b>	2 Federal income tax withheld 381.08					
3 Social security wages	4 Social security tax withheld						
5 Medicare wages and	6 Medicare tax withheld						
d Control number Dept.		Corp.	Employer	use only			
000157 R8/BCT							
c Employer's name, address, and ZIP code							

BNS INTERNATIONAL INC 425 OLD NEWMAN RD SUITE 303 FRISCO, TX 75034

b	Employer's FED ID number 46-2968515	a Employee's SSA number XXX-XX-5296					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a					
14	Other	12b					
		12c					
		12d					
		13 Stat emp. Ret. plan 3rd party sick page					
	Empleyee's neme address	<u> </u>					

e/f Employee's name, address and ZIP code

SAI SANDEEP PEDDI 550 LOWELL AVE **APT 12** 

CI	NCIN	NAII,	ОН	4522	U					
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	Local	ity nam	ie		
		Sta	ate	Refe	re	nce	$-$ C $\cap$	nv/		

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return

1	Wages, tips, other comp. 4800.00				Federa	income tax withheld 381.08			
3	Social security wages				4 Social security tax withheld				
5	Medicare wages and tips			6	Medica	re tax withheld			
d	Control number Dept.				Corp.	Employer use only			
00	0157	R8/BCT							
С	c Employer's name, address, and ZIP code								

**BNS INTERNATIONAL** INC 425 OLD NEWMAN FRISCO, TX 75034 RD SUITE 303

b	Employer's FED ID number 46-2968515	a Employee's SSA number XXX-XX-5296					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a					
14	Other	12b					
		12c					
		12d					
		13 Stat emp. Ret. plan 3rd party sick pa					

e/f Employee's name, address and ZIP code

SAI SANDEEP PEDDI 550 LOWELL AVE **APT 12** CINCINNATI, OH 45220

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

or Local Reference Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return