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 family 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 Service of the servic 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.

Instructions for Employee

A set of the set of

S200.00. 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 4173, Social Security and Medicare Tax on Unreported Tip Income, with your received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to FOrm W-2 Wage and Tax Statement 2000

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this J—Nontaxable six k pay (information only, not included in boxss 1, 3, or 5) K=20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. Computer on your behalf (including amounts from a section 125 (carteering plan). Any amount over 50,000 also in included in box 1, 1, Chil and Dependent Care Expenses of the social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your incurred compensation or nongovernmental section 457(b) plant has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your incurred admediate control to box 1 if is a distribution made to you from a nonqualified deferred a compensation or nongovernmental section 457(b) plant has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your and and efferral and received a distribution in the same calendar year, mil same calendar year. If you made a deferral and received a distribution in the same calendar year, our are or will be age 62 by the need of the calendary exert, your employer should file Form SSA13, propring this mount.

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 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$15.500 (\$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

compute any taxable and nontaxable amounts. Vor-Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

securary wage base), and 3), see rub. 525, I axable and Nontaxable Income, for reporting 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 (HSAc)

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 included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR.
 A.A.-Designated Roth contributions under a section 430(h) plus
 BB-Designated Roth contributions under a section 430(h) plus
 DB-Designated Roth contributions under a section 430(h) plus
 DD-Designated Roth contributions under a section 430(h) plus
 DD-Designated Roth contributions under a section 437(h) plus.
 DE-Designated Roth contributions under a schwart and the section 457(h) plus.
 DF-Designated Roth contributions under a schwart and the section 457(h) plus.
 DF-Designated Roth contributions under a schwart and the schwart and schwart and the schwart and schwart and the schwart and the

Conv C for any low color records. This information is being furnished to the Internal Revenue Service.

Form W-2 Wage and Tax Statement						2020		Copy	C, for emp	oloyee's	s records This information If you are require may be imposed	is being furnished to the Internal Revenue S d to file a tax return, a negligence penalty or on you if this income is taxable and you fail	
					c Employer's name, address, and ZIP code COLLABORATE SOLUTIONS INC					Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
		035-6	035-67-0389		415 BOSTON TPKE STE 302 SHREWSBURY MA 01545			1 Wa	ges, tips, other compensation 49028.40	2 Federal Income tax withheld 6199.39			
	loyee	plan		sick pay						3 So	3 Social Security wages 4 Social Security tax withheld		
12 See li	12 See Instra. for Box 12 14 Other			e Employee's name, address, and ZIP code				dicare wages and tips	6 Medicare tax withheld 8 Allocated Tips				
				407 RU	SATVIK RAO VALA 407 RUNNING BROOK RD				cial Security tips	11 Nonqualified plans			
					HOOVER AL 35226							rification Code	
15 State	Employe	or's state I D	No	16 State wages	tins etc		17 State income tax		18 Local wages, tips, et		19 Local income tax	20 Locality name	
AL MN	R009091009		3'	7126.04		1469.19 651.68	2002 nages, tips, et	-		20 200000 100/10			
1411.4	2323721	L			1	1702.30		0.51.00					

Form W-2 Wage and Tax Statement

2020

2020

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

b Employer's identification number a Employee			Void 0848-PAYROL mployee's social security number 035-67-0389 Third-party sick pay			c Employer's name, address, and ZIP code COLLABORATE SOLUTIONS INC 415 BOSTON TPKE STE 302 SHREWSBURY MA 01545			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 1 Wages, tips, other compensation 2 Federal Income tax withheld 49028.40 6199.39 3 Social Security wages 4 Social Security tax withheld			
Linp	, ojce p	pian Sick pay						5 Social Security Wages				
12 See li	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		
				SATVIK RAO VALA 407 RUNNING BROOK RD			7 Socia	al Security tips	8 Allocated Tips			
					HOOVI	ER AL 35226		10 Dep	endent care benefits	11 Nonqualified plans		
								Veri	fication Code			
15 State Employer's stat			te I.D. No. 16 State wages,			17 State income tax	18 Local wages, tips, etc.		19 Local income tax	20 Locality name		
AL R009091009		19			7126.04	1469.19						
MN 2323721		1		1		651.68						

Form W-2 Wage and Tax Statement

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

d Control number Void					c Employer's name, address, and ZIP code COLLABORATE SOLUTIONS INC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number				415 BOSTON TPKE STE 302				1 War	1 Wages, tips, other compensation 2 Federal Income tax withheld			
26-21	26-2135579 035-67-0389			SHREV	SBURY MA	01545		. mag	49028.40	6199.39		
13 Statutory Retirement Employee plan		Third-party sick pay		SHREWSBURY MA 01545		3 Soci	al Security wages	4 Social Security tax withheld				
12 See Instrs. for Box 12 14 Other				e Employee	's name, address, and ZIP	code		5 Medi	care wages and tips	6 Medicare tax withheld		
					SATVIK RAO VALA 407 RUNNING BROOK RD				7 Soci	al Security tips	8 Allocated Tips	
					HOOVER AL 35226				10 Dep	endent care benefits	11 Nonqualified plans	
									Ver	fication 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			
AL R009091009		9		3'	7126.04		1469.19					

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. 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 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 institution. For 2020 or if income is earned for services provided while you were an immate at a peak institution. For 2020 or of in known is done information, vist wow stress you?EITC. Also see Pub. 596, Earned Income Credit. Any IIC that is more than your tax hability 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 Sulement, with the Social Security Administration (SSA) to correct any mane. SSN, or more yamout error reported to the SA on Form W-2. Be sure to get your copies of Form W-2: from your emphyse for all corrections made so your may file them with your tax return. If your name and SSN are correct to thar only 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 caling 800-772-1213. You may also visit the SSA webside are wowes SSA, gov. Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Rox 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 mere than one employer in 2020 and more than SS.537.40 in social security and/or Tizr 1 nitrod retirement (RRTA) taxes were withheld, you may be able to china a credit for the excess against your federal income tax. If you had more than asslot and come requires tharken the societ of the societ as algorithm of the one railvoad employer and more than SS.012.70 in Tier 2 RRTA tax was withheld, you also may be able to china a credit networks and interaction one can be also allow may be able to china a credit networks and the societ as algorithm of the more railvoad employer and more than SS.012.70 in Tier 2 RRTA tax was withheld, you also may be able to china a credit networks and the societ as algorithm of the societ as algorithm and the societ as algorithm of the societ as algorithm Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Instructions for Employee

A set action for Entliptive Box I. Enter this amount on the federal income tax withheld 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 abox 8200.000.

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 deferrals (codes D, E, F and S) and designated Roth contributions (codes AA, BB, and EB) under all plans are generally limited to a total of \$19,500 (\$153,500 f you only have SIMPLE plans; \$22,5200 for section 40(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code far limited to \$19,500. Deferrals under code H are limited to \$7,000. How ever, 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 of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral 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 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 limit on Elective deferral lective deferral lective deferral lective 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 EL, your made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferral, consider 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

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.

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

requirem

requirements. W—Employer 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 (FIS As).

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.

instructions for Forms 1040 and 1040-SR. AA—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 tavalite**. BE—Designated Roth contributions under governmental section 457(b) plan. This amount does not BE—Designated Roth contributions under 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 accempt organization section 457(b) plan. FE—Permitted benefits under a qualified small employer health reinbursement arrangement GG—Income from qualified quary grants under section 83(i) HIB—Aggregate deferrals under section 83(o) clections as of the close of the calendar year Box 13.1 (If er Keirement plan¹⁵ box) checked, special limits may apply to the amount of traditional IRA-contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement Arrangements (IRAs). Box 14.1 employers may use this box to report information such as state disability insurance taxes withEdL union dues, uniform payments, health insurance premiums deducted, nontaxable income,

rcions for Forms 1040 and 10. . This amount includes the 1.4. 5, as well as the 0.9% Addition 000. . This amount is not included i ax return, see the instructions for must fike Form 4137, Societ neome tax return to report at la is that you received a smaller a sceived, report that amount eve Form W-2 W.	5% Medicare nal Medicare n boxes 1, 3, for Forms 10 al Security an east the alloca mount. If yo n if it is more	Tax withheld or Tax on any of t 5, or 7. For infu 40 and 1040-SR d Medicare Tax tted tip amount u u have records t e or less than the	n all Medicare wage hose Medicare wag ormation on how to on Unreported Tip inless you can prov- hat show the actual allocated tips. Use	s and tips s es and tips report tips Income, w e with adec amount of Form 4137	hown D=Decitive deferrals to a section above a SIMPLE retirement account him B=Decitive deferrals under a sect F=Decitive deferrals under a sect G=Decitive deferrals under a sect bin G=Decitive deferrals and employ deferred compensation plan bin H=Decitive deferrals to a section	t is part of a section 401(k) ar ion 403(b) salary reduction ag ion 408(k)(6) salary reduction er contributions (including no 501(c)(18)(D) tax-exempt or how to deduct.	rangement. reement SEP selective deferrals) to a section ganization plan. See the instru-	rals under educational assistance payments, or a m Raifroad employers use this box to repor- tax, Medicare tax, and Additional Medici- employer in railroad retirement (RRTA) Net Keep Copy C of Form W-2 for at return. However, to help protect yours s receiving social security benefits, just in	least 3 years after the due date for filing your income ocial security benefits, keep Copy C until you begin case there is a question about your work record and/o	
d Control number				Void	c Employer's name, address, and Z	IP code		Department of the Treasury - Internal Reven	ue Service	
0008-11017894			PAYROL		COLLABORATE SOLUTIONS INC			OMB No. 1545-0008		
b Employer's identificatio	n number		social security nu	mber	415 BOSTON TPKE STE 302 SHREWSBURY MA 01545			1 Wages, tips, other compensation	2 Federal Income tax withheld	
26-2135579 13 Statutory	Retireme		57-0389 Third-party					49028.40 619		
Employee	plan	ant	sick pay					3 Social Security wages	4 Social Security tax withheld	
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	
					SATVIK RAO VAL 407 RUNNING BRO			7 Social Security tips 8 Allocated Tips		
					HOOVER AL 35226			10 Dependent care benefits 11 Nonqualified plans		
								Verification Code		
	's state I.D.	No.	16 State wages		17 State income tax		ocal wages, tips, etc.	19 Local income tax	20 Locality name	
/IN 2323721				1.	1902.36	651.68				

Form W-2 Wage and Tax Statement 2020

d Control number 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			mber			1 Wages, tips, other compensation	2 Federal Income tax withheld			
		Third-party sick pay				3 Social Security wages	4 Social Security tax withheld			
12 See Instrs. for Box 12	12 See Instrs. for Box 12 14 0		14 Other		e Employee'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			
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		

Form W-2 Wage and Tax Statement 2020

d Control number				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				umber			1 Wages, tips, other compensation	2 Federal Income tax withheld	
					4				
13 Statutory Retirement Third-par Employee plan sick pay		Third-party sick pay			3 Social Security wages	4 Social Security tax withheld			
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	
							7 Social Security tips	8 Allocated Tips	
							10 Dependent care benefits	11 Nonqualified plans	
							Verification Code		
15 State Emplo	yer's state I.I	D. No.	16 State wages	s, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	