2020 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Corp. Employer use only 000002 K7/MGC Employer's name, address, and ZIP code MOUNTAIN IT SOLUTIONS

LLC 6850 TPC DRIVE SUITE 205 MCKINNEY, TX 75070

Batch #90621

e/f Employee's name, address, and ZIP code SATHISH REDDY CHINNI 874 TRAILEND ROAD **EAGEN, MN 55123**

Employer's FED ID number a Employee's SSA number 82-5391953 XXX-XX-8583 Wages, tips, other comp. Federal income tax withheld 78740.00 12783.95 Social security wages Social security tax withheld 5 Medicare wages and tips 6 Medicare tax withheld 8 Allocated tips 7 Social security tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. MN 6645108 43093.00 17 State income tax 18 Local wages, tips, etc. 2647.20 19 Local income tax 20 Locality name

Wages, tips, other con 78740.00 12783.95 Social security wages Social security tax withheld Medicare wages and tips 6 Medicare tax withheld d Control number Employer use only 000002 K7/MGC 6 Employer's name, address, and ZIP code MOUNTAIN IT SOLUTIONS LLC 6850 TPC DRIVE SUITE 205 MCKINNEY, TX 75070 Employer's FED ID number 82-5391953 Employee's SSA number XXX-XX-8583 Social security tips Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12

e/f Employee's name, address and ZIP code SATHISH REDDY CHINNI 874 TRAILEND ROAD **EAGEN, MN 55123**

14 Other

5 State Employer's state ID no. 16 State wages, tips, etc. 43093.00 17 State income tax 18 Local wages, tips, etc. 2647.20 19 Local income tax 20 Locality name Federal Filing Copy

12c 12d

13 Stat emp Ret. plan 3rd party sick pay

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 Social Security Medicare MN. State Wages, Compensation Wages Wages Box 3 of W-2 Box 5 of W-2 Box 16 of W-2 Box 1 of W-2

Gross Pay 78,740.00 78,740.00 78,740.00 43,093.00 Reported W-2 Wages 78,740.00 0.00 0.00 43,093.00

2. Employee Name and Address.

SATHISH REDDY CHINNI 874 TRAILEND ROAD **EAGEN, MN 55123**

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	Wages, tips, other comp. 78740.00		2 Federal income tax withheld 12783.95			
3 Social security	Social security wages		4 Social security tax withheld			
5 Medicare wage	s and tips	6 Medica	re tax with	nheld		
d Control number	Dept.	Corp.	Employe	r use only		
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Employer's nam	nd ZIP cod	е				
MOUNTAIN IT SOLUTIONS LLC 6850 TPC DRIVE SUITE 205 MCKINNEY, TX 75070						
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7 Social security	tips	8 Allocat				
)		10 Depend	dent care I	benefits		
11 Nonqualified pl	ans	12a				
14 Other		12b				
		12c				
		12d				
		13 Stat emp	Ret. plan 3	rd party sick pay		
e/f Employee's name, address and ZIP code SATHISH REDDY CHINNI 874 TRAILEND ROAD EAGEN, MN 55123						
15 State Employer 664510		16 State v		, etc. 43093.00		
17 State income ta	2647.20	18 Local	wages, tips	s, etc.		
19 Local income to	ах	20 Localit	y name			
MN	.State Re	ferenc	e Cop	ру		

Statement

Copy 2 to be filed with employee's State Income Tax Return.

Wages, tips, other comp. 78740.00		2 Federal income tax withheld 12783.95				
3	Social security wag	es	4	Social	security tax	withheld
5	Medicare wages an	d tips	6	Medica	re tax withhe	eld
d	Control number	Dept.		Corp.	Employer	use only
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MOUNTAIN IT SOLUTIONS LLC 6850 TPC DRIVE SUITE 205 MCKINNEY, TX 75070

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		10 Dependent care benefits
onqualified plai	ns	12a
Other		12b
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pa

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

SATHISH REDDY CHINNI 874 TRAILEND ROAD **EAGEN, MN 55123**

15 State MN	Employer's state ID no. 6645108	16	State wages, tips, etc. 43093.00
17 State	income tax	18	Local wages, tips, etc.
	2647.20		
19 Local	income tax	20	Locality name

MN.State Filing Copy Wage and Tax Statement

Copy 2 to be filed with employee's State Income Tax Return.