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.

Also see Pub. 396, trained informe cream, my face and the 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, 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 archive for the excess fave your federal income tax. If you had more than ore than 65.012.70 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit for the excess against your federal more than 65.012.70 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

0942-16029834

47-4219681

12 See Instrs. for Box 12

CA

b Employer's identification number

- Instructions for Empitoyee

 Box 1. Einer this amount on the wages line of your tax return.

 Box 2. Einer 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 89-99, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 89-99

 Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips she in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips she

\$200,000.

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 Unreported Tip Income, with your income tax return to report at least the allocated by amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips your received arenal that impout new if it is improve less than the allocated time. Use Form 4137 to

0000000738-BILLAB

818-66-3948

Third-party sick pay

16 State wages, tips, et

470.55

figure the social security and Medicare tax owed on tips you ddin'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% exc is tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR.

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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. R. F. and S) and designated Roth contributions (codes A. B. Ba and ED) under all plans are generally limited to a total of \$91,500 (15),300 if you only have SIMPLE plans; \$22,500 for section 40(8) plans if you qualify for the 15-year rule explained in \$7,000. Horizan kinder code Har emited to \$7,000. Deferrals under code Gar emited to \$7,000. Deferrals under code Gar emited to \$10,500. Deferrals under code Har emited to \$7,000. Horizan kinder of \$7,000. Horizan kin 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 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.

 $\textbf{C} — Taxable\ cost\ of\ group-term\ life\ insurance\ over\ \$50,000\ (included\ in\ boxes\ 1,\ 3\ (up\ to\ social\ security\ wage\ base),\ and\ 5)$

- D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under
- 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
- G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan
- 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.

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

P—Exchadable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in boxes 1.3, 0.5 to)

Q—Nontastable onmbat 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—Employees and prediction contributions under a section 408(p) SIMPLE plan (not included in box S—Employees allay reduction contributions under a section 408(p) SIMPLE plan (not included in box

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

Employer contributions (including amounts the employee elected to contribute using a section 5 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts

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 othecked, 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, 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, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

empayer in maroan returnent (RKIA) compensation.

Note: Keep Copy C of Form W. Cf or at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, inst in case there is a question about your work record and/or earnings in a particular year.

Form W-2 Wage and Tax Statement

Retire plan

14 Other CASDI

2020

FORSYS INC

c Employer's name, address, and ZIP code

MILPITAS CA 95035

HOUSTON TX 77042

e Employee's name, address, and ZIP code

MRUDHU KIRAN AKELLA

10575 WESTPARK DR, APT 235,

691 S MILPITAS BLVD STE 213

Copy C, for employee's records This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fall to report it.

Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 1 Wages, tips, other compe 47054.26 7315.03 3 Social Security wages 5 Medicare wages and tips 6 Medicare tax withheld 7 Social Security tips 8 Allocated Tips 10 Dependent care benefits 11 Nongualified plans Verification Code 18 Local wages, tips, etc 19 Local income tax 20 Locality name

Form W-2 Wage and Tax Statement

state ID No

051-3529-8

2020

2020

47054.26

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

d Control number 0942-16029834 0000000738- b Employer's identification number a Employee's			BILLAB social security nu	Void	FORSY	syyer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
47-4219681			818-66-3948			691 S MILPITAS BLVD STE 213 MILPITAS CA 95035			1 Wages, tips, other compensation 47054.26	2 Federal Income tax withheld 7315.03
		Retirem plan	ent	Third-party sick pay		WILETTAS CA 93033			3 Social Security wages	4 Social Security tax withheld
12 See I	12 See Instrs. for Box 12		Other ASDI		70.55	e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld
						MRUD	HU KIRAN AKELLA WESTPARK DR, APT		7 Social Security tips	8 Allocated Tips
					HOUSTON TX 77042			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		
CA 051-3529-8			4		7054.26	2644.7	1			

2644.71

Form W-2 Wage and Tax Statement

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

d Control number 0942-16029834 0000000738- b Employer's identification number a Employee's				BILLAB social security nu	Void	FORSY		12	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
47-4219681		Retirem		-66-3948 Third-party		691 S MILPITAS BLVD STE 213 - MILPITAS CA 95035		1 Wages, tips, other compensation 47054.26	2 Federal Income tax withheld 7315.03	
		plan	sick pay					3 Social Security wages	4 Social Security tax withheld	
12 See Instrs. for Box 12			Other ASDI	4	470.55		e's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
							HU KIRAN AKELLA WESTPARK DR, APT 23	35,	7 Social Security tips	8 Allocated Tips
						HOUSTON TX 77042			10 Dependent care benefits	11 Nonqualified plans
									Verification Code	
15 State Employer's state I.D			1					18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CA 051-3529-		29-8		4		7054.26	2644.71			