

Form W-2 Wage and Tax Statement 2020

21002

Copy C, for employees records

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|---|-------------------------------------|--|--|---|----------------------------|--|---|--|--|
| d Control number 0020-0022FB86 000000366-0000MO | | Void | c Employer's name, address, and ZIP code SOURCE INFOTECH INC 3840 PARK AVENUE SUITE C-205 EDISON NJ 08820 | | | Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 | | | |
| b Employer's identification number 22-3747193 | | a Employee's social security number 890-31-5314 | | | | 1 Wages, tips, other compensation 112144.04 | 2 Federal income tax withheld 20142.79 | | |
| 13 Statutory employee | Retirement plan X | Third-party sick pay | | | | 3 Social security wages 114152.08 | 4 Social security tax withheld 7077.43 | | |
| 12 See Instrs. for Box 12 D 2008.04 | | 14 Other | | e Employee's name, address, and ZIP code KISHORE CHITTAMURU 1218 OXFORD HILL CT APT 2 ST LOUIS MO 63146 | | 5 Medicare wages and tips 114152.08 | 6 Medicare tax withheld 1655.21 | | |
| | | | | | | 7 Social security tips | 8 Allocated tips | | |
| | | | | | | 10 Dependent care benefits | 11 Nonqualified plans | | |
| 15 State MO | Employer's state ID No. 25083694 | | 16 State wages, tips, etc. 112144.04 | 17 State income tax 5200.00 | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | | |

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 fail to report it.

Copy B, to be filed with employees FEDERAL tax return

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Copy 2, to be filed with employees tax return for MO

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| 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 | | |
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