

Form W-2 Wage and Tax Statement 2020

21001

Copy C, for employees records

d Control number 0064-17115891 000000036-		Void	c Employer's name, address, and ZIP code STRATITUDE LLC 4545 FULLER DRIVE STE 410 IRVING TX 75038				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 82-5200489		a Employee's social security number 680-59-7293				1 Wages, tips, other compensation 68771.26		2 Federal income tax withheld 8191.67			
13 Statutory employee		Retirement plan		Third-party sick pay		3 Social security wages 68771.26		4 Social security tax withheld 4263.82			
12 See Instrs. for Box 12		14 Other				e Employee's name, address, and ZIP code RAHUL REDDY DASARIPALLY 1803 E CAMP MCDONALDS ROAD MOUNT PROSPECT IL 60056		5 Medicare wages and tips 68771.26		6 Medicare tax withheld 997.18	
						7 Social security tips		8 Allocated tips			
						10 Dependent care benefits		11 Nonqualified plans			
15 State IL	Employer's state ID No. 825200489		16 State wages, tips, etc. 68771.26	17 State income tax 3174.02	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 IL

Form W-2 Wage and Tax Statement 2020

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