Form W-2 W	lag	ge and Ta	ax 🗄	Statement
Copy C - For EMPLOY	YEE	S RECOR	DS	2019
This information is being furnished to the I to file a tax return, a negligence penalty or	r othe	r sanction may be	Dor	OMB No. 1545-0008 partment of Treasury -
imposed on you if this income is taxable a Control	ind yo	ou fail to report it.	Inte	rnal Revenue Service
number OJE08 1839)	00054		
Employer's name, address, and ZIP code AGREEYA SOLUT	пт	ONC T	NC	
605 COOLIDGE	D		INC	
FOLSOM CA 956	-			
FOLDOM CA JSC	55	0		
Employee's name, address, and ZIP code				
SARWAR ALI MO	ΟH	AMMED		
1701 WESTPARK	ζ.	DR , Z	AP	т 236
LITTLE ROCK A	٩R	7220	4	
15559.54 1 Wages, tips, other comp.	4	2 Federal i	2	322.80
i wages, ups, other comp.		2 Federal income tax withheld		
3 Social security wages		4 Social security tax withheld		
5 Medicare wages and tips		6 Medicare tax withheld 8 Allocated tips		
7 Social security tips		8 Allocated tips		
9		10 Dependent care benefits		
11 Nonqualified plans		12a _{DD}		833.50
		12b		
13 Statutory Retirement Third-party plan Sick pay		12c		
		12d		
Employee's social security no.		14		
586-69-0600				
Employer ID number (EIN)				
20-2965578 15 St. Employer's state ID number	16	State wages, tips	oto	17 State income tax
		5559.54 887.25		
AR 123349/3-WHW			4	00/.25
18 Local wages, tips, etc. 19		Local income tax		20 Locality name

Form W-2 Wage and Tax Statement Copy B — To Be Filed With CDJ 9 Employee's FEDERAL Tax Return. This information is being furnished to the IRS. Control number 0JE08 1839 00054 Employer's name, address, and ZIP code AGREEYA SOLUTIONS INC 605 COOLIDGE DR FOLSOM CA 95630				
Employee's name, address, and ZIP code SARWAR ALI MOHAMMED 1701 WESTPARK DR , APT 236 LITTLE ROCK AR 72204				
15559.54 1 Wages, tips, other comp.	4 2322.80 2 Federal income tax withheld			
3 Social security wages	4 Social security tax withheld			
5 Medicare wages and tips				
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a _{DD} 833,50 12b			
13 Statutory Retirement Third-party sick pay	^y 12c 12d			
$\begin{array}{l} \mbox{Employee's social security no}\\ \mbox{5.86}-69-0600\\ \mbox{Employer ID number (EIN)}\\ \mbox{20-2965578}\\ \mbox{15 st. Employer's state ID number} \end{array}$	0. 14 16 State wages, tips, etc. 17 State income tax			
AR 12354973-WHW	15559.54 887.25			
18 Local wages, tips, etc.	19 Local income tax 20 Locality name			

2019 W-2 and Earnings Summary

	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages and Tips
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
Gross Pay	\$15,987.06	\$15,987.06	\$15,987.06
Less: Non-Taxable Earnings	\$0.00	(\$15,559.54)	(\$15,559.54)
Less: Retirement Deductions	\$0.00	N/A	N/A
Less: Other Pre-tax Deductions	(\$427.52)	(\$427.52)	(\$427.52)
Less: Third Party Sick Pay	\$0.00	\$0.00	\$0.00
Less: Excess Wages	N/A	\$0.00	N/A
Total Reported Wages	\$15,559.54	\$0.00	\$0.00
Tax Withheld	Fed Income Box 2 of W-2 \$2,322.80	Social Security Box 4 of W-2	Medicare Box 6 of W-2

	AR State Wages, Tips, etc.
	Box 16 of W-2
Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions	\$15,987.06 \$0.00 \$0.00 (\$427.52)
Less: Third Party Sick Pay Total Reported Wages	\$0.00 \$15,559.54
	AR State Income Tax

Tax Withheld

Box 17 of W-2 \$887.25

SARWAR ALI MOHAMMED 1701 WESTPARK DR , APT 236 LITTLE ROCK, AR 72204

The Form W-2 Box 1 wages are the Gross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus any additional compensation received after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, etc.

Form W-2 Wage and Tax Statement				
Copy 2 — To Be Filed V				
Employee's State, City, or Income Tax Return.	Department of Treasury -			
Control number 0 JE08 1839	Internal Revenue Service 9 00054			
Employer's name, address, and ZIP code				
AGREEYA SOLUT	TIONS INC			
605 COOLIDGE				
FOLSOM CA 956	530			
Employee's name, address, and ZIP code	9			
	OHAMMED			
	K DR , APT 236			
LITTLE ROCK AR 72204				
15559.5 1 Wages, tips, other comp.	4 2322.80 Federal income tax withheld			
1 Wages, tips, other comp.	2 Federal income tax withheld			
3 Social security wages 4 Social security tax with				
5 Medicare wages and tips	s 6 Medicare tax withheld			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a DD 833.50			
	12b			
13 Statutory Retirement Third-party plan sick pay	120			
	12d			
Employee's social security ne $586-69-0600$	no. 14			
Employer ID number (EIN)	—			
20-2965578				
15 St. Employer's state ID number	16 State wages, tips, etc. 17 State income tax			
AR 12354973-WHW	15559.54 887.25			
18 Local wages, tips, etc.	19 Local income tax 20 Locality name			

Form W-2 Wage and Tax Statement					
Copy 2 — To Be Filed With 2019					
Employee's State, City, or Local			OMB No. 1545-0008		
Income Tax Return.			Dep Inte	artment of Treasury - rnal Revenue Service	
Control number 0JE08 1839)	00054			
Employer's name, address, and ZIP code					
AGREEYA SOLUT	CI(ONS IN	JC		
605 COOLIDGE	D	R			
FOLSOM CA 956	53	0			
		•			
Employee's name, address, and ZIP code					
SARWAR ALI MO)H	AMMED			
1701 WESTPARK			٩Þ	т 236	
LITTLE ROCK A		,			
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3 Social security wages		4 Social se		ity tax withheld	
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5 Medicare wages and tips		6 Medicare tax withheld			
0 1		8 Allocated tips			
7 Social security tips		o Anocale	սսբ	5	
9	10 Dopond	ont .	aara banafita		
3	10 Dependent care benefits				
11 Nongualified plana		122 DD	022 50		
11 Nonqualified plans		12a _{DD} 12b		833.50	
13 Statutory Retirement Third-parts					
13 Statutory Retirement Third-party plan Sick pay	y	12c			
		12d			
Employee's social security n	0.	14			
586-69-0600					N
Employer ID number (EIN)					PYW2
<u>20-2965578</u>					2
15 St. Employer's state ID number	16	State wages, tips,	etc.	17 State income tax	
AR 12354973-WHW	1	5559.5	4	887.25	െ
18 Local wages, tips, etc. 19		Local income tax		20 Locality name	55
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					1 22

NTF 2582955

Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't 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 income credit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of the 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 security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2019 or if income is earned for services provided while you were an inmate at a penal institution. For 2019 income limits and more information, visit www.irs.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.

Clergy and religious workers. If you aren't subject to social 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 name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c 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 name at any SSA office or by calling 800-772-1213. You also may 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 2019 and more than \$8,239.80 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 one railroad employer and more than \$4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 instructions and Pub. 505, Tax Withholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages 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 8959, Additional Medicare Tax. See the Form 1040 instructions 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 shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

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 tip amount unless you can prove that you 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. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

(Instructions for Employee continued on back of Copy 2.)

Instructions for Employee (*Continued from back of Copy B.*)

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy. **Box 12.** The following list explains the codes shown in box 12. You may need this information to

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 EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only have SIMPLE plans; \$22,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2019, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the 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 elective deferral limit must be included in income. See the instructions for Form 1040.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A-Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions. B-Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.
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 Form 1040 instructions for how to deduct.

J-Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K-20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

 $\label{eq:loss} \begin{array}{l} \textbf{L-Substantiated employee business expense} \\ \text{reimbursements (nontaxable)} \end{array}$

(Instructions for Employee continued on back of Copy C.)

Instructions for Employee (Continued from back of Copy 2.)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

 N-Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.
P-Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q-Nontaxable combat pay. See the instructions for Form 1040 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-Employee salary 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,

Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. V—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.
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 (HSAs).

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 also is included in box 1. It is subject to an additional 20% tax plus interest. See the Form

to an additional 20% tax plus interest. See the Form 1040 instructions. AA-Designated Roth contributions under a section

AA – Designated Roth contributions under a section 401(k) plan

 $\ensuremath{\textbf{BB-}}\xspace$ Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement GG—Income from qualified equity grants under section 83(i) HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is 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. 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 clergy'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.

Note: Keep Copy C of Form W-2 for 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, just in case there is a question about your work record and/or earnings in a particular year.