This PDF is Generated for W-2s for below Selection Criteria

System: PRD

Run By: MARCIK01

Run Date: 03/30/2022

Run Time: 13:50:22

Report Name: EW2\_MARCIK01\_20220330135022

Year: 2021

Only Hourly Employees are included
Terminated Employees are included

| Personnel# |
|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| 01450326   |            |            |            |            |            |            |            |            |

A Manage time at home and a section	10 Federal Income Association and	A Manage Constitution of the Constitution of t	O. F. alamad In a super day with health		
1 Wages, tips, other compensation 785.03	2 Federal Income tax withheld 0.93	1 Wages, tips, other compensation 785.03	2 Federal Income tax withheld 0.93		
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld		
785.03 5 Medicare wages and tips	48.67 6 Medicare tax withheld	785.03 5 Medicare wages and tips	48.67 6 Medicare tax withheld		
785.03	11.38	785.03 a Employee's SSA number	11.38		
a Employee's SSA number	Employer use only		Employer use only		
b Employer's FED ID number	d Control number	179-69-6564 b Employer's FED ID number	d Control number		
56-1874931 c Employer's name, address, and ZIP code	01450326	56-1874931 c Employer's name, address, and ZIP code	01450326		
Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217		Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED S	STATEMENT	REISSUED S	STATEMENT		
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits	9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a See instructions for box 12		
13 Statutory Retirement Third-Party Employee plan Sick pay	12b	13 Statutory Retirement Third-Party Employée plan Sick pay	12b		
13 Statutory Retirement Third-Party Employée plan Sick pay		13 Statutory Retirement Third-Party Employee plan Sick pay			
14 Other UI/WF/SWF 3.33	12c	14 Other UI/WF/SWF 3.33	12c		
0.00	12d	DI- 3.69	12d		
e Employee's first name and initial Last nam HARIOM MEHTA 125 WEBSTER AVENUE JERSEY CITY NJ 07307	ie Suff.	e Employee's first name and initial Last nam HARIOM MEHTA 125 WEBSTER AVENUE JERSEY CITY NJ 07307	e Suff.		
f Employee's address and ZIP code 15 State Employer's state ID	18 Local wages, tips, etc	f Employee's address and ZIP code 15 State Employer's state ID	18 Local wages, tips, etc		
NJ 561-874-931/000		NJ 561-874-931/000			
16 State wages, tips, etc. 785.03	19 Local income tax 2.20	16 State wages, tips, etc. 785.03	19 Local income tax 2.20		
17 State income tax 11.78	20 Locality name	17 State income tax 11.78	20 Locality name		
W-2 Wage and Tax Statement 202	Dept. of the Treasury - Internal Revenue Service. This information is being furnished to the IRS. 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.	W-2 Wage and Tax Statement 202	Dept. of the Treasury - Internal Revenue Service		
Copy C for Employee's records		Copy 2 To Be Filed With Employee's STATE Income			
1 Wages, tips, other compensation 785.03	2 Federal Income tax withheld 0.93	1 Wages, tips, other compensation 785.03	2 Federal Income tax withheld 0.93		
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld		
785.03 5 Medicare wages and tips	48.67 6 Medicare tax withheld	785.03 5 Medicare wages and tips	48.67 6 Medicare tax withheld		
785.03	11.38	785.03	11.38		
a Employee's SSA number	Employer use only	a Employee's SSA number	Employer use only		
179-69-6564 b Employer's FED ID number	d Control number	179-69-6564 b Employer's FED ID number	d Control number		
56-1874931 c Employer's name, address, and ZIP code	01450326	56-1874931 01450326 c Employer's name, address, and ZIP code			
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9	10 Dependent care benefits	9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a See instructions for box 12		
, ,	12b		12b		
13 Statutory Retirement Third-Party Employee plan Sick pay		13 Statutory Retirement Third-Party Employee plan Sick pay			
14 Other UI/WF/SWF 3.33	12c	14 Other UI/WF/SWF 3.33	12c		
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16 State wages, tips, etc. 785.03	19 Local income tax 2.20	16 State wages, tips, etc. 785.03	19 Local income tax 2.20		
17 State income tax	20 Locality name	17 State income tax	20 Locality name		
11.78 Form OMB. No. 1545-0008	Dept. of the Treasury - Internal Revenue	11.78 Form OMB. No. 1545-0008	Dont of the Transumy Internal Revenue		
W-2 Wage and Tax 202 Copy B To Be Filed With Employee's FEDERAL Tax	Service	W-2 Wage and Tax 202 Copy 2 To Be Filed With Employee's CITY or LOCAL	Service		