NY. State Reference Copy

Wage and Tax
2021

Statement
State ment
Copy 2 to be filed with employee's State Income Tax ReturgMB No. 1545-0009

d Control number
0000001783 RRA
SAKS.C CWH0
A S 4161

Employer's name, address, and ZIP code SAKS INCORPORATED AGENT FOR:SAKS COM LLC 225 LIBERTY ST 24TH FL NEW YORK, NY 10281

RETURN POSTAGE GUARANTEED

e/i Employee's name, address, and ZIP code

ABHI DESAI 30 RIVER CT APT 405

JERSEY CITY, NJ 07310

b Employer's FED ID number 62-0331040	XXX-XX-7204	
1 Wages, tips, other comp.	2 Federal income tax withheld	
42324.52	7167.00	
3 Social security wages	4 Social security tax withheld	
5 Medicare wages and tips	6 Medicare tax withheld	
7 Social security tips	8 Allocated tips	
9	10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12	
	12b D 225.00	
14 Other 217.18 NY PFL	126 D 223.00	
,, ,	12d	
	13 Stat emp. Ret. plan 3rd party sick pay	
15 State Employer's state ID	no. 16 State wages, tips, etc.	
NY 620331040 6	42324.52	
17 State income tax 2426.32	18 Local wages, tips, etc.	
19 Local income tax	20 Locality name	

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.

Your gross pay may not match your box 1 totals due to adjustments made for GTL, 401(k), cafeteria plans, etc...

To change your employee W-4 profile information, file a new W-4 with your payroll department.

Social Security Number: XXX-XX-7204

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Fold and Detach Here

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PAGE 02 OF 02

1	d Control number Dept.		2 Federal income tax withheld 7167.00 4 Social security tax withheld 6 Medicare tax withheld	
3				
5				
d 00			Corp.	Employer use only A 4161

c Employer's name, address, and ZIP code SAKS INCORPORATED AGENT FOR:SAKS COM LLC 225 LIBERTY ST 24TH FL NEW YORK, NY 10281

RETURN POSTAGE GUARANTEED

b	Employer's FED ID number 62-0331040	a Employee's SSA number XXX-XX-7204	
7	Social security tips	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 C 9.60	
9			
11	Nonqualified plans		
14 Other 217.18 NY PFL	Other 217.18 NY PFL	12b D 225.00	
	12c		
	12d		
		13 Stat emp. Ret. plan 3rd party sick pay	

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ABHI DESAI 30 RIVER CT APT 405 JERSEY CITY, NJ 07310

15	State	Employer's state ID no. 620331040 6	16 State wages, tips, etc. 42324.52	
17 State income tax 2426.32			18 Local wages, tips, etc.	
40			201 seeliht name	

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