Employee Re	ference Copy			
Wage a	and Tax			
Staten	OMB No. 1545-0008			
Copy C for employee'srecords.				
d Control number Dept.	Corp. Employer use only			
000039 K7/4WT				
Employer's name, address,	and ZIP code			
BLUECLARION	CORPORATION			
3 HAWTHORN	PARKWAY			
220				
VERNON HILLS	, IL 60061			
	Batch #94225			
/f Employee's name, address,	and ZIP code			
ANUSHA TELAPROLU				
633 COOKS COURT				
BRENTWOOD, TN 37	/02/			
Employer's FED ID number	a Employee's SSA number			
83-3520934	2 Federal income tax withheld			
Wages, tips, other comp.				
23014.40	3478.24			
Social security wages	4 Social security tax withheld			
23014.40	1426.89			
5 Medicare wages and tips	6 Medicare tax withheld			
23014.40	333.71			
Social security tips	8 Allocated tips			
	40 Demondent and herefite			
l .	10 Dependent care benefits			
14 Nenguelified plane				
1 Nonqualified plans	-			
	12a See instructions for box 12			
14. Other	12a See instructions for box 12			
4 Other	12a See instructions for box 12           12b           12c			
4 Other	12a See instructions for box 12           1           12b           12c           12d			
4 Other	12a See instructions for box 12                       12b           12c           12d			
	12a See instructions for box 12         12b         12c         12d         12d         13 Stat emp Ret. plan 3rd party sick part			
	12a See instructions for box 12       12b       12c       12d       12d       13 Stat emp       Ret. plan 3rd party sick pay			
14 Other 15 State Employer's state ID no	12a See instructions for box 12         1         12b         12c         12d         12d         13 State emp Ret. plan 3rd party sick pay         2.         16 State wages, tips, etc.			
15 State Employer's state ID no	12a See instructions for box 12       12b       12c       12d       12d       13 Stat emp       Ret. plan 3rd party sick pay			
	12a See instructions for box 12         12b         12c         12c         12d         13 State emp Ret. plan 3rd party sick parts         2. 16 State wages, tips, etc.			

## 2020 W-2 and EARNINGS SUMMARY

Medicare Wages Box 5 of W-2

23,014.40

23,014.40



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	
Gross Pay Reported W-2 Wages	23,014.40 <b>23,014.40</b>	23,014.40 <b>23,014.40</b>	

2. Employee Name and Address.

## ANUSHA TELAPROLU 633 COOKS COURT BRENTWOOD, TN 37027

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1 Wages, tips, other comp. 23014.40	2 Federal income tax withheld 3478.24	1 Wages, tips, other comp. 23014.40	2 Federal income tax withheld 3478.24	1 Wages, tips, other comp. 23014.40	2 Federal income tax withheld 3478.24	
3 Social security wages 23014.40	4 Social security tax withheld 1426.89	3 Social security wages 23014.40	4 Social security tax withheld 1426.89	<sup>3</sup> Social security wages 23014.40	4 Social security tax withheld 1426.89	
5 Medicare wages and tips 23014.40	6 Medicare tax withheld 333.71	5 Medicare wages and tips 23014.40	6 Medicare tax withheld 333.71	5 Medicare wages and tips 23014.40	6 Medicare tax withheld 333.71	
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	
000039 K7/4WT		000039 K7/4WT		000039 K7/4WT		
c Employer's name, address, a			c Employer's name, address, and ZIP code		c Employer's name, address, and ZIP code	
BLUECLARION CORPORATION BLUECLARION CORPORATION			BLUECLARION	CORPORATION		
3 HAWTHORN	PARKWAY	3 HAWTHORN 220	PARKWAY	3 HAWTHORN 220	PARKWAY	
	II 60061		II 60061		II 60061	
VERNON HILLS, IL 60061 VERNON HILLS, IL 60061 VERNON HILLS, IL 60061						
b Employer's FED ID number 83-3520934	a Employee's SSA number XXX-XX-4874	b Employer's FED ID number 83-3520934	a Employee's SSA number XXX-XX-4874	b Employer's FED ID number 83-3520934	a Employee's SSA number XXX-XX-4874	
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a	11 Nonqualified plans	12a	
14 Other	12b	14 Other	12b	14 Other	12b	
	12c		12c		12c	
	12d		12d		12d	
	13 Stat emp.Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay	
eff Employee's name, address and ZIP code eff Employee's name, address and ZIP code		nd ZIP code	e/f Employee's name, address and ZIP code			
ANUSHA TELAPROLU		ANUSHA TELAPROLU				
633 COOKS COURT 633 COOKS COURT		633 COOKS COURT				
BRENTWOOD, TN 37027 BRENTWOOD, TN 37027		BRENTWOOD, TN 37027				
, -		, ,				
15 State Employer's state ID no.	16 State wages, tips, etc.	15 State Employer's state ID no. 16 State wages, tips, etc.		15 State Employer's state ID no	o. 16 State wages, tips, etc.	
		17. Otata in anna tau		17 State income tax		
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.		18 Local wages, tips, etc.	
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	
Federal Filing Copy		State Refe	State Reference Copy		City or Local Reference Copy	
W-2 Wage and Statem Copy B to be filed with employee's Fe	ent	W-2 Wage a Statemen Copy 2 to be filed with employee's State		W-2 Wage a Statem Copy 2 to be filed with employee's City	nent $MB No 1545-0008$	