## 2020 W-2 and EARNINGS SUMMARY

Employee Reference Copy

2 Wage and Tax

Statement Statement ployee's records.

Control number 01111 CLIF/GC7

Dept. 5RM

Employer's name, address, and ZIP code AMTEX SYSTEM INC 28 LIBERTY STREET 6TH FL NEW YORK NY 10005

Batch #02653

Employee's name, address, and ZIP code HULASI THOTA 41 SUMMIT AVENUE ACKENSACK NJ 07601

Empl	oyer's FED ID number 22-3494842		's SSA number X-XX-6549	
Wag	es, tips, other comp.	2 Federal income tax withheld 22095.78		
	155176.32			
Socie	al security wages	4 Social sec	urity tax withheld	
	137700.00	8537.40		
Medicare wages and tips 161958.58		6 Medicare tax withheld 2348 . 40		
Social security tips		8 Allocated tips		
		10 Dependent care benefits		
Nonqualified plans		12a See instructi	ons for box 12 6782 . 26	
Other		12b W	3000.00	
Other	31.20 SDI	12c AA	1695.61	
	196.72 NY PFL	12d		
Elisten telepine man		13 Stat emp. Ret	plan 3rd party sick pay	
State Employer's state ID no VY 22-3494842		16 State wages, tips, etc. 155176.32		
State	income tax	18 Local wage	s, tips, etc.	

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	Medicare Wages Box 5 of W-2	NY. State Wages, Tips, Etc. Box 16 of W-2	
Gross Pay	169,556,58	169,556.58	169,556.58	169,556.58	
Less 401(k) (D-Box 12)	6,782.26	N/A	N/A	6,782,26	
Less Other Cafe 125	3,068.00	3,068.00	3,068.00	3,068.00	
Less Cafe 125 HSA (W-Box 12)	3,000.00	3,000.00	3,000.00	3,000.00	
Less Transportation-Salary Reduction	1,530.00	1,530,00	1,530.00	1,530.00	
Wages Over Limit	N/A	24,258.58	N/A	N/A	
Reported W-2 Wages	155,176.32	137,700.00	161,958.58	155,176.32	

2. Employee Name and Address.

THULASI THOTA 241 SUMMIT AVENUE HACKENSACK NJ 07601

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Wages, tips, other c 15517	2 Federa	income tax	withheld 095.78	
Social security wage	4 Social security tax withheld 8537,40			
Medicare wages and 16195	6 Medic	are tax withho	eld 348.40	
Control number 1111 CLIF/GC7	Dept. 5RM	Corp.	Employer A	use only 170

20 Locality name

Employer's name, address, and ZIP code

Local income tax

AMTEX SYSTEM INC 28 LIBERTY STREET 6TH FL NEW YORK NY 10005

a Employee's SSA number XXX - XX - 6549			
8 Allocated tips			
10 Dependent care benefits			
12a See instructions for box 12 D 6782.26			
12b W 3000,00			
12c AA 1695.61			
12d			
13 Stat emp. Ret. plan 3rd party sick pay			

**IULASI THOTA** 

1 SUMMIT AVENUE CKENSACK NJ 07601

State Y	Employer's state ID no. 22 - 3494842	16 State wages, tips, etc. 155176.32	
State income tax 9481.97		18 Local wages, tips, etc.	
Local income tax		20 Locality name	
2000			

Federal Filing Copy Statement

Fold and Detach Here -

b	Employer's FED ID number 22-3494842	a Employee's	s SSA number K-XX-6549
7	Social security tips	8 Allocated t	
g		10 Dependent	care benefits
11	Nonqualified plans	12a D	6782.26
14 C	Other	12b W	3000.00
	31,20 SDI 196,72 NY PFL	12c AA	1695.61
		12d	
		13 Stat emp. Ret.	plan 3rd party sick pa

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

THULASI THOTA 241 SUMMIT AVENUE HACKENSACK NJ 07601

15 State Employer's state ID no NY 22-3494842	. 16 State wages, tips, etc. 155176.32
17 State income tax 9481.97	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

NY.State Reference Copy Wage and Tax Statement

1	1 Wages, tips, other comp. 155176.32		2 Federal income tax withheld 22095 . 78			
3	Social security wages 137700.00		4 Social security tax withheld 8537.40			
5	Medicare wages and tips 161958.58		6	Medica	ere tax wi	thheld 2348,40
d 50	Control number	Dept. 5RM		Corp.	Emple A	oyer use only 170
c	Employer's name, ad	dress, a	nd	ZIP cod	e	

AMTEX SYSTEM INC 28 LIBERTY STREET 6TH FL NEW YORK NY 10005

Ь	Employer's FED ID number 22-3494842	a Employee's SSA number XXX-XX-6549	
7	Social security tips	8 Allocated tips	
9		10 Dependen	t care benefits
11	Nonqualified plans	12a D	6782.26
14 Other 31.20 SDI 196.72 NY PF	Other	12b W	3000.00
	31.20 SDI	12c AA	1695.61
	196.72 NY PFL	12d	
		13 Stat emp. Re	et. plan 3rd party sick pa

e/f Employee's name, address and ZIP code THULASI THOTA

241 SUMMIT AVENUE HACKENSACK NJ 07601

IVT	22-3494842	16 State wages, tips, etc. 155176.32
	9481.97	18 Local wages, tips, etc.
19 Loca	al income tax	20 Locality name

NY.State Filing Copy Wage and Tax Statement