2019 W-2 and EARNINGS SUMMARY



Employee Reference
Wage and Tax
Statement

Copy 2019
OMB No. 1545-0008

 Copy C for employee's records.
 ONB NO. 1949-0000

 d Control number
 Dept.
 Corp.
 Employer
 use only

 0 0 0 2 9 8 PHIL/096
 T
 6 6

Employer's name, address, and ZIP code

EXPEDENT CORP 3 ETHEL RD STE #304 A EDISON NJ 08817

Batch #00817

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

TANUJ MANDA 4400 TRUXEL RD APT#98

SACRAMENTO CA 95834

| 3, | 7017 | WILLIAID CA | 33034 | | | |
|----|--------|-----------------------|---|--|--|--|
| b | Emplo | yer's FED ID number | a Employee's SSA number | | | |
| | | 47-1855766 | 831-97-4377 | | | |
| 1 | Wage | s, tips, other comp. | 2 Federal income tax withheld | | | |
| | | 32747.64 | 4360.73 | | | |
| 3 | Social | security wages | 4 Social security tax withheld | | | |
| | | 32747.64 | 2030.35 | | | |
| 5 | Medic | are wages and tips | 6 Medicare tax withheld | | | |
| | | 32747.64 | 474.84 | | | |
| 7 | Social | security tips | 8 Allocated tips | | | |
| 9 | | | 10 Dependent care benefits | | | |
| 11 | Nonai | alified plans | 12a See instructions for box 12 | | | |
| | | • | DD 1350.00 | | | |
| 11 | Other | | 12b | | | |
| ' | Other | 327.48 SDI | 12c | | | |
| | | 327.40 3DI | 12d | | | |
| | | | 13 Stat emp Ret. plan 3rd party sick pa | | | |
| 15 | State | Employer's state ID n | no. 16 State wages, tips, etc. | | | |
| C | CA | 059-3196 9 | 32747.64 | | | |
| 17 | State | income tax | 18 Local wages, tips, etc. | | | |
| | | 1804.04 | | | | |
| 19 | Local | income tax | 20 Locality name | | | |
| | | | | | | |

| _ | | | | | |
|-----|------------------------|-----------------|-----------------------------------|--------------|----------|
| 1 | Wages, tips, other of | omp. | 2 Federa | l income tax | withheld |
| | 327 | 47.64 | | 4 | 1360.73 |
| 3 | Social security wage | es 47.64 | 4 Social | security tax | withheld |
| 5 | Medicare wages and 327 | I tips 47.64 | 6 Medicare tax withheld 474.84 | | |
| d | Control number | Dept. | Corp. | Employer | use only |
| 0 (| 00298 PHIL/096 | | | T | 60 |
| | | | | | |

Employer's name, address, and ZIP code

EXPEDENT CORP 3 ETHEL RD STE #304 A EDISON NJ 08817

| b Employer's FED ID number | er a Employee's SSA number |
|----------------------------|---|
| 47-1855766 | 831-97-4377 |
| 7 Social security tips | 8 Allocated tips |
| 9 | 10 Dependent care benefits |
| 11 Nonqualified plans | 12a See instructions for box 12 DD 1350.00 |
| 14 Other | 12b |
| 327.48 SDI | 12c |
| | 12d |
| | 13 Stat emp Ret. plan 3rd party sick pay |
| " | 1.710 |

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

TANUJ MANDA 4400 TRUXEL RD APT#98

SACRAMENTO CA 95834

| Γ | 15 State | Employer's state ID no. | 16 State wages, tips, etc. | |
|-----|----------|-------------------------|----------------------------|--|
| | CA | 059-3196 9 | 32747.64 | |
| Γ | 17 State | income tax | 18 Local wages, tips, etc. | |
| L | | 1804.04 | | |
| | 19 Local | income tax | 20 Locality name | |
| L | | | | |
| - 1 | | Fastanal Eili | | |

Federal Filing Copy

Wage and Tax 2019

Statement
Copy B to be filed with employee's Federal Income Tax Return. 1545-0008

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. 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 | CA. State Wages, Tips, Etc. Box 16 of W-2 |
|---------------------|--|--|-----------------------------------|---|
| Gross Pay | 34,097.64 | 34,097.64 | 34,097.64 | 34,097.64 |
| Less Other Cafe 125 | 1,350.00 | 1,350.00 | 1,350.00 | 1,350.00 |
| Reported W-2 Wages | 32,747.64 | 32,747.64 | 32,747.64 | 32,747.64 |

2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.

TANUJ MANDA 4400 TRUXEL RD APT#98 SACRAMENTO CA 95834

Exemptions/Allowances:

FEDERAL: 2

STATE: 2

STATE:

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| 1 | Wages, tips, other of | omp. 47.64 | 2 Federa | l income tax | withheld | |
|-----|-------------------------|-----------------|--|--------------|----------|--|
| 3 | Social security wag 327 | es 47.64 | 4 Social security tax withheld 2030.35 | | | |
| 5 | Medicare wages and 327 | d tips 47.64 | 6 Medicare tax withheld 474.84 | | | |
| d | Control number | Dept. | Corp. | Employer | use only | |
| 0.0 | 0298 PHIL/096 | | | т | 60 | |

c Employer's name, address, and ZIP code

EXPEDENT CORP 3 ETHEL RD STE #304 A EDISON NJ 08817

| b | Employer's FED ID number 47-1855766 | a Employee's SSA number 831-97-4377 | | | | |
|----|-------------------------------------|---|--|--|--|--|
| 7 | Social security tips | 8 Allocated tips | | | | |
| 9 | | 10 Dependent care benefits | | | | |
| 11 | Nonqualified plans | 12a DD 1350.00 | | | | |
| 14 | Other | 12b | | | | |
| | 327.48 CA SDI | 12c | | | | |
| | | 12d | | | | |
| | | 13 Stat emp. Ret. plan 3rd party sick pay | | | | |
| | | | | | | |

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

TANUJ MANDA 4400 TRUXEL RD APT#98 SACRAMENTO CA 95834

| 15 State | Employer's state ID no. | o. 16 State wages, tips, etc. |
|----------|-------------------------|-------------------------------|
| CA | 059-3196 9 | 32747.64 |
| 17 State | income tax | 18 Local wages, tips, etc. |
| | 1804.04 | |
| 19 Local | income tax | 20 Locality name |

CA.State Reference Copy
Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax
Return. No. 1545-000

| 1 | Wages, tips, other of | omp. | 2 | Federa | l income tax | withheld | |
|----|------------------------|-----------------|---|-----------------------------------|--------------|----------|--|
| | 327 | 47.64 | | | 4 | 360.73 | |
| 3 | Social security wag | es | 4 | Social | security tax | withheld | |
| | 327 | 47.64 | | | 2 | 030.35 | |
| 5 | Medicare wages and 327 | d tips 47.64 | 6 | 6 Medicare tax withheld 474.84 | | | |
| d | Control number | Dept. | | Corp. | Employer | use only | |
| 00 | 0298 PHIL/096 | | | | T | 60 | |

Social Security Number: 831-97-4377

Taxable Marital Status: SINGLE

c Employer's name, address, and ZIP code

EXPEDENT CORP 3 ETHEL RD STE #304 A EDISON NJ 08817

| b | Employer's FED ID number | a Employee's SSA number | | | | | |
|----|--------------------------|--|----|----|----------|-------|----|
| | 47-1855766 | | | 83 | 31-97 | -4377 | |
| 7 | Social security tips | 8 Allocated tips | | | | | |
| 9 | | 10 Dependent care benefits | | | | 3 | |
| 11 | Nonqualified plans | 12a | | | | | |
| | | | DD | | | 1350. | 00 |
| 14 | Other | 12b | Ī | | | | |
| | 327.48 CA SDI | 12c | i | | | | |
| | | 12d | | | | | |
| | | 13 Stat emp. Ret. plan 3rd party sick pa | | | sick pay | | |
| 1 | | 1 | | | 1 | l | |

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

TANUJ MANDA 4400 TRUXEL RD APT#98 SACRAMENTO CA 95834

| 15 | State | Employer's state | ID no. | 16 | State | wages, | tips, etc. |
|----|-------|------------------|--------|----|-------|---------|------------|
| C | A | 059-3196 9 | | | | | 32747.64 |
| 17 | State | income tax | | 18 | Local | wages, | tips, etc. |
| | | 1804 | .04 | | | | |
| 19 | Local | income tax | | 20 | Local | ity nam | е |
| | | | | | | | |

CA.State Filing Copy

Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax

Copy 2 to be filed with employee's State Income Tax

Return.