Notice to Employee
Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Free me if you do not have to file a tax return. You may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income recdit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can this take the EIC if your airestement income is more than the specified amount for 2019 or if ancome is earned for services provided while you were an intained at a penal institution. For 2019 in come limits and more information, vist www.sr.goveETIC.

Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employer to correct your employer to the correct way and the state of the correct way and any statement, with the Social Security Administration (SSA) to correct any Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount crorr reported to the SAs on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may fit them with your tax return. If your name and SSN are correct to that each the sum as a shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2019 and more than \$8,239.80 in social security and/or TFr 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,38.50 in TFr 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Waitholding and Estimated Tax.

### Instructions for Employee

\$200,000.

Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you recreded a smaller amount. If you have records that show the actual amount of tips your received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate

must report as income and on other tips you did not report to your employer. By filing Form 4137, syour social security in well be credited to by your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security record (used to figure your benefits). So your social security in the solid possible transmitted dependent care benefits that you can be so your social security or RATA tax on tratable cost of group-term life insurance over \$50,000 also is included in hox 1, complete form 2441, Child and Dependent Care Expenses, to compute any tratable and nontaxable amounts.

Box 11. This amounts (a) reported in box 1 if it is a distribution made to you from a nonqualified of section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your are or will be soon to your are or will be age 62 by the end of the calcular year, your employer should if the Poss 1, 3, or 5)

Jacobs cere to tax on travable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

Note that the possible of the possible you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D. E. F. and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only more SIMPLE plans, \$22,000 for socion 403(b) plans if you qualify for the \$1-5-year rule explained in Pub. \$71). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to

nave start Expans, second of the public of t

included in income: See the assultances for Point 1990.

Note, If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is

shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8999, Additional Medicare Tax. See the Form 1040 instructions. You may be required to report this amount on Form 8999, and the second of the federal income tax withheld on all Medicare wages and tips shown Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown as NAPIE retrement account that is grant of a section 401(k) arrangement. Also includes deferrals under a SIMPLE retrement account that is grant of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agree F-Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to mute any taxable and nontaxable amounts.

ompute any taxanie and nonaxanie amounts.

—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social scurity wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting

requirements.

W—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts

(HSAs). Y—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plas interest. See the Form 1040 instructions.

1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not

BB—Designated Koth contributions under a section 43(5) plan
DD—Cost of emphyser-sponsored health coverage. The amount reported with Code DD is not
taxable to the contributions under a governmental section 457(b) plan. This amount does not
apply to contributions under a tax-except organization section 457(b) plan. This amount does not
apply to contributions under at sux-except organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reinbursement arrangement
GG—Income from qualified equalty grants under section 83(i) elections as of the close of the calendar year
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional
IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement
Arrangements (IRAs).
Box 14. Employers may use this box to report information such as state disability insurance taxes
withheld, union dues, uniform payments, health insurance premiums deducted, montacable income,
withheld, union dues, uniform payments, health insurance premiums deducted, montacable income,
withheld union dues, uniform payments, health insurance premiums deducted, montacable income,
Raifoud employers use this box to report information such as state disability insurance taxes
withheld union Macken article to the control of the properties of the control of the prop

# Form W-2 Wage and Tax Statement

2019

Copy C, for employee's records

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be immorsed on your if this income is subable and you fall to report it.

						·	, ., .c. cp.c.	máy be imposed	on you if this income is taxable and you fa	
d Control n	Control number Void			c Employer	s name, address, and ZIP code		Department of the Treasury - Internal Revenue Service			
0027-130	027-13075571 0000000010-		CLOUD EPA LLC			OMB No. 1545-0008				
b Employer	r's identification num	ber a Employee's	social security nu	mber	1800 B	YBERRY ROAD STE 90	)9			
27-282	20318	107-	81-1347			NGDON VALLEY PA 1		1 Wages, tips, other compensation 85746.70	2 Federal Income tax withheld 13968.86	
13 Statut		tirement	Third-party		HUNII	NODON VALLET FAT	9000			
Employ	Employee   plan   sick pay						3 Social Security wages 15480.00	4 Social Security tax withheld 959.76		
12 See Inst	trs. for Box 12	14 Other			e Employee	's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
								15480.00	224.46	
						MARRU HILADELPHIA DR		7 Social Security tips	8 Allocated Tips	
						ERVILLE OH 43081		10 Dependent care benefits	11 Nonqualified plans	
15 State	Employer's stat	te I.D. No.	16 State wages	tips, etc.		17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
CO 2	27890036			15	5052.80	667.00				
OH :	53-045719 7	7		70	)693.90	2249.02				
								1		

# Form W-2 Wage and Tax Statement

2019

2019

# Copy B, to be filed with employee's FEDERAL tax return

d Control number Void 0027-13075571 0000000010-		' '	s name, address, and ZIP code  DEPA LLC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
27-2820318 107-		Third-party		1800 BYBERRY ROAD STE 909 HUNTINGDON VALLEY PA 19006		1 Wages, tips, other compensation 85746.70				
Emp	Employee   plan   sick pay		sick pay					3 Social Security wages 15480.00	4 Social Security tax withheld 959.76	
12 See Instrs. for Box 12		2 14	Other			VINAY 1007 PH	's name, address, and ZIP code ' MARRU HILADELPHIA DR ERVILLE OH 43081		5 Medicare wages and tips  15480.00  7 Social Security tips  10 Dependent care benefits	8 Allocated Tips  11 Nonqualified plans
15 State CO OH	2789003 53-0457		). No.	16 State wages,	1:	5052.80 0693.90	17 State income tax 667.00 2249.02		19 Local income tax	20 Locality name

# Form W-2 Wage and Tax Statement

# Copy 2, to be filed with employee's tax return for CO

d Control n	number				Void	c Employer's	s name, address, and Z	IP code		Donortme	ant of the Tressure	Internal Revenue	Carria	
0027-13075571 0000000010-			CLOUD EPA LLC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008							
27-2820318 107-81		81-1347		1800 BYBERRY ROAD STE 909 HUNTINGDON VALLEY PA 19006			1 Wages, tips, other compensation 2 Federal Income tax 85746.70			2 Federal Income tax with	held 13968.86			
		Third-party sick pay						3 Social S	Security wages	15480.00	4 Social Security tax with	959.76		
12 See Instrs. for Box 12 14 Other				e Employee	's name, address, and Z	IP code		5 Medica	re wages and tips	15400.00	6 Medicare tax withheld	224.46		
						VINAY MARRU 1007 PHILADELPHIA DR					Security tips	15480.00	8 Allocated Tips	224.46
						WESTE	ERVILLE OH	43081		10 Depen	ndent care benefits		11 Nonqualified plans	
												•		
15 State		er's state I.	D. No.	16 State wages			17 State income tax		18 Local wages, tips, etc.		19 Local income t	ах	20 Locality name	
CO 2	278900	36			1.5	5052.80		667.00						

Notice to Employee
Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Free me if you do not have to file a tax return. You may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income recdit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can this take the EIC if your airestement income is more than the specified amount for 2019 or if ancome is earned for services provided while you were an intained at a penal institution. For 2019 in come limits and more information, vist www.sr.goveETIC.

Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employer to correct your employer to the correct way and the state of the correct way and any statement, with the Social Security Administration (SSA) to correct any Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount crorr reported to the SAs on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may fit them with your tax return. If your name and SSN are correct to that each the sum as a shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2019 and more than \$8,239.80 in social security and/or TFr 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,38.50 in TFr 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Waitholding and Estimated Tax.

### Instructions for Employee

\$200,000.

Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you recreded a smaller amount. If you have records that show the actual amount of tips your received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate

must report as income and on other tips you did not report to your employer. By filing Form 4137, so your social security in will be credited to your social security record (used to figure your benefits). So your social security record (used to figure your benefits). E-Substantiated employee business capease reimbursements (nontasable) by so or incurred on your behalf (achding amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1.0 miles from 1441. (Thild and Dependent Care Expenses, to compute any taxable and nontasable amounts.

Box 11. This annual is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your acro or will be age 62 by the end of the calendar year, your employee should like Form 585.1 all, Employer Report of Special Wage Payments, with the Social Security Administration and give you acro or will be age 62 by the end of the calendar year, your employer should like Form 585.1 all, Employer Report of Special Wage Payments, with the Social Security Administration and give you acropy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D. E. F. and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only more SIMPLE plans, \$22,000 for socion 403(b) plans if you qualify for the \$1-5-year rule explained in Pub. \$71). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to

three Short Le pains, 32000 to a section 1990, 1990. Deferrals under code H are limited to \$7,000. Deferrals under code are limited to \$7,000. However, if you were at least age \$0 in 2010, your employer may have allowed an additional However, if you were at least age \$0 in 2010, your employer may have allowed an additional deferral amount is not subject to the overall limit on decivite deferrals. For code G, the limit on electification may be higher for the last 3 years before you reach retriement age. Contact your plan administrant for more information. Amounts in section of the overall decivite deferral limit must be included in income. See the instructions for Form 1040.

Mote. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is

shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8999, Additional Medicare Tax. See the Form 1040 instructions. You may be required to report this amount on Form 8999, and the second of the federal income tax withheld on all Medicare wages and tips shown Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown as NAPIE retrement account that is grant of a section 401(k) arrangement. Also includes deferrals under a SIMPLE retrement account that is grant of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agree F-Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

ompute any taxanie and nonaxanie amounts.

—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social scurity wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting

requirements.

W—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts

(HSAs). Y—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plas interest. See the Form 1040 instructions.

1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not

DD—Cost of employer-sponsored hearn coverage. In amount specification of \$7(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FE—Permitted benefits under a qualified small employer bealth reinbursement arrangement GG—Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year Box 13 ft the "Retirement plan" box is checked, special lands may apply to the amount of traditional RRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement Arrangements (IRAs).

IAA-Continuous you may deuced. See 201. 390-3, Continuous on minorial returning Arrangement (IRAs) use this box to report information such as state disability insurance trace which the state of the come, which the state of the state of

# Form W-2 Wage and Tax Statement

#### 2019

### Copy 2, to be filed with employee's tax return for OH

b Employer's identification number a Employee's social security number		c Employer's name, address, and ZIP code CLOUD EPA LLC 1800 BYBERRY ROAD STE 909		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008  1 Wages, tips, other compensation 2 Federal Income tax withheld			
27-2820318	107-81-1347		HUNTINGDON VALLEY PA 190	006	85746.70	13968.86	
	13 Statutory Retirement Third-party Employee   plan   sick pay			1	3 Social Security wages 15480.00	4 Social Security tax withheld 959.76	
12 See Instrs. for Box 12	14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips 15480.00	6 Medicare tax withheld 224.46	
			VINAY MARRU 1007 PHILADELPHIA DR		7 Social Security tips	8 Allocated Tips	
			WESTERVILLE OH 43081		10 Dependent care benefits	11 Nonqualified plans	
15 State Employer's state OH 53-045719 7	1		17 State income tax 10693.90 2249.02	8 Local wages, tips, etc.	19 Local income tax	20 Locality name	
		,					

#### Form W-2 Wage and Tax Statement 2019

	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenu OMB No. 1545-0008	ie Service
	nber			1 Wages, tips, other compensation	2 Federal Income tax withheld
13 Statutory Retirement Third-party Employee plan sick pay				3 Social Security wages	4 Social Security tax withheld
Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
	l			7 Social Security tips	8 Allocated Tips
				10 Dependent care benefits	11 Nonqualified plans
. No. 16 State wages, t	tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
1	ent Third-party sick pay  Other	a Employee's social security number  ent Third-party sick pay  Other	a Employee's social security number  ent Third-party sick pay  Other e Employee's name, address, and ZIP code	a Employee's social security number  ent Third-party stck pay  Other e Employee's name, address, and ZIP code	a Employee's social security number  ent Third-party sick pay  Other  e Employee's name, address, and ZIP code  5 Medicare wages and tips  7 Social Security tips  10 Dependent care benefits

#### Form W-2 Wage and Tax Statement 2019

d Control number  b Employer's identification nu	mher 3 Employee'	Void X s social security number	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
a Employee's social security number				ſ	1 Wages, tips, other compensation	2 Federal Income tax withheld		
	etirement Ian	Third-party sick pay		<u> </u>	3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
					7 Social Security tips	8 Allocated Tips		
					10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's st	ate I.D. No.	16 State wages, tips, e	tc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		