

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

c Employer's name, address, and ZIP code US BANK NATIONAL ASSOC 4000 W BROADWAY ROBBINSDALE MN 55422		7 Social security tips	1 Wages, tips, other compensation 112409.82	2 Federal income tax withheld 11079.11	
		8 Allocated tips	3 Social security wages 114796.00	4 Social security tax withheld 7117.35	
		9	5 Medicare wages and tips 114796.00	6 Medicare tax withheld 1664.54	
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 68.12	
e Employee's name, address, and ZIP code BHABANI SANKAR MOHANTY 5461 N EAST RIVER RD APT 1501 CHICAGO IL 60656		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other		12b D 2386.18
		b Employer identification number (EIN) 31-0841368			12c W 1299.78
		a Employee's social security number 211-39-9485			12d DD 18579.08
15 State IL	Employer's state ID number 31-0841368 000 7	16 State wages, tips, etc. 112409.82	17 State income tax 5229.09	18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Copy B-To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS website at www.irs.gov/efile.

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 imposed on you if this income is taxable and you fail to report it.

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

c Employer's name, address, and ZIP code US BANK NATIONAL ASSOC 4000 W BROADWAY ROBBINSDALE MN 55422		7 Social security tips	1 Wages, tips, other compensation 112409.82	2 Federal income tax withheld 11079.11	
		8 Allocated tips	3 Social security wages 114796.00	4 Social security tax withheld 7117.35	
		9	5 Medicare wages and tips 114796.00	6 Medicare tax withheld 1664.54	
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 68.12	
e Employee's name, address, and ZIP code BHABANI SANKAR MOHANTY 5461 N EAST RIVER RD APT 1501 CHICAGO IL 60656		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other		12b D 2386.18
		b Employer identification number (EIN) 31-0841368			12c W 1299.78
		a Employee's social security number 211-39-9485			12d DD 18579.08
15 State IL	Employer's state ID number 31-0841368 000 7	16 State wages, tips, etc. 112409.82	17 State income tax 5229.09	18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.) OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS website at www.irs.gov/efile.

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

c Employer's name, address, and ZIP code US BANK NATIONAL ASSOC 4000 W BROADWAY ROBBINSDALE MN 55422		7 Social security tips	1 Wages, tips, other compensation 112409.82	2 Federal income tax withheld 11079.11	
		8 Allocated tips	3 Social security wages 114796.00	4 Social security tax withheld 7117.35	
		9	5 Medicare wages and tips 114796.00	6 Medicare tax withheld 1664.54	
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 68.12	
e Employee's name, address, and ZIP code BHABANI SANKAR MOHANTY 5461 N EAST RIVER RD APT 1501 CHICAGO IL 60656		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other		12b D 2386.18
		b Employer identification number (EIN) 31-0841368			12c W 1299.78
		a Employee's social security number 211-39-9485			12d DD 18579.08
15 State IL	Employer's state ID number 31-0841368 000 7	16 State wages, tips, etc. 112409.82	17 State income tax 5229.09	18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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

c Employer's name, address, and ZIP code US BANK NATIONAL ASSOC 4000 W BROADWAY ROBBINSDALE MN 55422		7 Social security tips	1 Wages, tips, other compensation 112409.82	2 Federal income tax withheld 11079.11	
		8 Allocated tips	3 Social security wages 114796.00	4 Social security tax withheld 7117.35	
		9	5 Medicare wages and tips 114796.00	6 Medicare tax withheld 1664.54	
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 68.12	
e Employee's name, address, and ZIP code BHABANI SANKAR MOHANTY 5461 N EAST RIVER RD APT 1501 CHICAGO IL 60656		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other		12b D 2386.18
		b Employer identification number (EIN) 31-0841368			12c W 1299.78
		a Employee's social security number 211-39-9485			12d DD 18579.08
15 State IL	Employer's state ID number 31-0841368 000 7	16 State wages, tips, etc. 112409.82	17 State income tax 5229.09	18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 **Dept. of the Treasury - IRS**