15 State	16 State wages, tips, etc. 17,493.9	90	17 State income tax 366.32	18 Loc	al wages, tips, etc.	19 Local in	come tax	20 Locality name
15 State Employer's state ID no.	16 State wages, tins, etc.	_		18100	al warres tine etc.	19   2001	i I	120 ) **
			101-2012	,			r !	
Floral Park NY 11001-1616			a Employee's social security num 101-90-2872	ber			12d	
50 McKee St		L	b Employer identification number 112481902				. 12c	
TERESA D TREJO	20020333	L			14 Other		12b	
Employee's name, address, and ZIP code	20020555 S			rty	· · · · · · · · · · · · · · · · · · ·		•	structions for box 12
BABYLON NY 11702		}	10 Dependent care benefits		17,49	93.90		253.61 estructions for box12
MAYCO BUILDING SERVICES IN 385 WEST MAIN STREET	IC.	F	9		17,49 5 Medicare wages and tip	93.90 s	6 Medicare	1,084.81 tax withheld
c Employer's name, address, and ZIP code	<u> </u>	_	8 Allocated tips		3 Social security wages		4 Social se	511.41 curity tax withheld
Form W-2 Wage and Tax Statement	2020		7 Social security tips		1 Wages, tips, other comp	ensation 93.90	2 Federal in	ncome tax withheld
	armoone rax return				OMB Na. 1545-0008		Dep	t of the Treasury- IRS
Copy 2 To Be Filed With Employee's State, City, or Loca	17,493.	90	366.32		OVD No. 4545 RRIG			
15 State Employer's state ID no.  NY   11-2792205	16 State wages, tips, etc.		17 State income tax	18 Loc	cal wages, tips, etc.	19 Local in	ncome tax	20 Locality name
		- }	101-90-2872					
50 McKee St Floral Park NY 11001-1616		}	112481902 a Employee's social security num	nber			. 12d	
TERESA D TREJO		ŀ	b Employer identification number	r(EIN)			. 12c	
e Employee's name, address, and ZiP code	20020555 <sup>5</sup>	Suff,	13 Statutory Rollremont Third-pa employee Plan Sick pa	irty y	14 Other		٠ 12b	
DADTLON INT 11/UZ		j	10 Dependent care benefits		11 Nonqualified plans		12a See ii	nstructions for box12
385 WEST MAIN STREET BABYLON NY 11702			9		5 Medicare wages and tip	s 93.90	6 Medicare	tax withheld 253.61
MAYCO BUILDING SERVICES IN	۱C.	Į			3 Social security wages 17,4	93.90	4 Social se	curity tax withheld 1,084.81
Form W-2 Wage and Tax Statement I			8 Allocated tips		1 Wages, tips, other comp	03.00	1	ncome tax withheld 511.41
- 14 6 14			7 Social security tips		1 Woose 4			
							Visit the IRS	t of the Treasury- IRS Web Site at www.iss.gov/efile
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NY 11-2792205	16 State wages, tips, etc. 17,493.9		17State income tax 366.32	18 Loc	cal wages, tips, etc.	19 Locali	ncome tax	20 Locality name
15 State Employer's state ID no.	1160							
Floral Park NY 11001-1616			a Employee's social security num ***-**-2872	nber			12d	
50 McKee St			b Employer identification number 112481902	r(EIN)	·		12c	
TERESA D TREJO	20020555	Suff.	13 Statutory Retirement Third-p. sick pa		14 Other		. 12b	
e Employee's name, address, and ZIP code	2000	<u> </u>		-	11 Nonqualified plans		:	nstructions for box12
BABYLON NY 11702			10 Dependent care benefits		17,4	93.90		253.61
MAYCO BUILDING SERVICES II 385 WEST MAIN STREET	NC.	ŀ	9			93.90		1,084.81
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Form W-2 Wage and Tax Statement	enen r		7 Social security tips		1 Wages, tips, other comp	ensation		ncome tax withheld
					This information is being furnished to the negligence penalty or other sanction may	e Internal Revenue	· · · · · · · · · · · · · · · · · · ·	
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NY 11-2792205	17,493.9	00	366.32		2 7 5 7 3 7 2			20 Lucality nam
15 State Employer's state ID no.	16 State wages, tips, etc.		17State income tax	18Lo	ocal wages, tips, etc.	19 Local	ncome tax	20 Locality nam
			101-90-2872	mber			, 12d	1
50 McKee St Floral Park NY 11001-1616			112481902 a Employee's social security nu					
TERESA D TREJO			b Employer identification numb	er(EIN)	4		.12c	
e Employee's name, address, and ZIP code	20020555	Suff.	13 Statutory Retrement Thirds employee Plan Sick p	arty ay	14 Other		₁ 12b	<u></u>
BABYLON NY 11702			10 Dependent care benefits		11 Nonqualified plans	133.30	12a See	253.61 Instructions for box12
385 WEST MAIN STREET			9		5 Medicare wages and ti		6 Medicar	e tax withheld
MAYCO BUILDING SERVICES II	NC.		8 Allocated tips		3 Social security wages	193.90	4 Social s	ecurity tax withheld 1,084.81
Form W-2 Wage and Tax Statement c Employer's name, address, and ZIP code	EUEU					pensation 193.90	2 rederai	income tax withheld 511.41

	2 Wage and Tax Statement	5050		/ Social security tips		1 Wages, tips, other cor	npensation 444.25	2 Federal in	ncome tax withheld
c Employer	's name, address, and ZIP code MAYCO BUILDING SERVICES IN			8 Allocated tips		3 Social security wages		4 Social se	411.75 curity tax withheld
	385 WEST MAIN STREET	C.		9		16, 5 Medicare wages and	444.25 tips		1,019.49 tax withheld
	BABYLON NY 11702			10 Dependent care benefits			444.25		238.32
e Employee	e's name, address, and ZIP code		0. "			11 Nonqualified plans		12a See in	structions for box12
. •	JOSE TREJO	20022695	Suff,	13 Statutory Retirement Third- employee Plan Sick p	party	14 Other		.12b	
	50 McKee St			b Employer identification numb	er(EIN	)		,12c	
	Floral Park NY 11001-1616			112481902 a Employee's social security nu	mber	_		120	
				101-90-4496		_			
15 State	Employer's state ID no.	16 State wages, tips, etc		17State income tax	18L	ocal wages, tips, etc.	19 Local	income tax	20 Locality name
NY_	11-2792205	16,444.2	5	323.37			10 2000		20 Locality name
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	_					This information is being furnished to to negligence penalty or negligence penalty or	he Internal Revenu kay be imposed on	te Service. If you are req you if this income is taxa	guired to file a tax return, a able and you fall to report it.
	2 Wage and Tax Statement	1020		7 Social security tips		1 Wages, tips, other com	pensation 144.25	2 Federal inc	come tax withheld
c Employers	s name, address, and ZIP code MAYCO BUILDING SERVICES IN	_		8 Allocated tips		3 Social security wages		4 Social sec	411.75 urity tax withheld
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e Employee'	's name, address, and ZIP code					11 Nonqualified plans		12a Seeins	structions for box12
	JOSE TREJO	20022695	Suff.	13 Statutory Retirement Third-pa employee Plan Slok pa	arty V	14 Other		125	
	50 McKee St			b Employer identification number 112481902	r(EIN)	1		, 12c	
	Floral Park NY 11001-1616			a Employee's social security nun	nber			. 12d	
				***-**-4496					
15 State NY	Employer's state ID no. 11-2792205	16 State wages, tips, etc.		17 State Income tax	18 Lo	cal wages, tips, etc.	19 Local	ncome tax	20 Locality name
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									ob Ske at www.irs.gov/offic
. 14/5	. W.C 177	n-n [		7 Social security tips		T 11/2			
	2 Wage and Tax Statement 2	טבט				1 Wages, tips, other com 16,4	pensation 44.25	2 Federal inc	come tax withheld 411.75
	MAYCO BUILDING SERVICES INC	<b>.</b>		8 Allocated tips		3 Social security wages 16.4	44.25	4 Social secu	rity tax withheld 1,019.49
	385 WEST MAIN STREET	J.		9		5 Medicare wages and tip	s	6 Medicare to	ax withheld
	BABYLON NY 11702			10 Dependent care benefits		16,4 11 Nonquelified plans	44.25	.12a See inst	238.32
e Employee's	s name, address, and ZIP code	20022695	Suff,	13 Statutory Rotirement Third-pa employee Plan Sick pay	irty	14 Other			0.0000000000000000000000000000000000000
	JOSE TREJO	20022093	,			14 Cirier		125	
	50 McKee St			b Employer identification number 112481902	r(EIN)			12c	
	Floral Park NY 11001-1616			a Employee's social security num	ber			12d	
				101-90-4496					
15 State NY	Employer's state ID no. 11-2792205	16 State wages, tips, etc. 15,444.	)E	17 State income tax	18 Lo	cal wages, tips, etc.	19 Local i	ncome tax	20 Locality name
			ري_	323.37	<b></b>				<del> </del>
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Form W-2	Wage and Tax Statement 2	020 <b>-</b>		7 Social security tips		1 Wages, tips, other comp		2 Federal inco	ome tax withheld
	name, address, and ZIP code			8 Allocated tips		16,4 3 Social security wages	44.25	4 Social secu	411.75 rity tax withheld
	MAYCO BUILDING SERVICES INC	•		9		16,4	44.25		1,019.49
	385 WEST MAIN STREET BABYLON NY 11702			9		5 Medicare wages and tip: 16,44		6 Medicare ta	x withheld 238,32
	DADIEON WE 11/02			10 Dependent care benefits		11 Nonqualified plans		12a See instr	ructions for box12
e Employee's	name, address, and ZIP code	20022695 S	uff.	13 Statutory Retirement Third-per Sick pay	ty .	14 Other		. 12b	
	JOSE TREJO		-	b Employer identification number		•		. 12c	
	50 McKee St Floral Park NY 11001-1616			112481902				120	
	(10) GEE GLY ME TTOOT-TOTO			a Employee's social security numl 101-90-4496	ber			12d	
15 State	Employer's state ID no.	15 Ctate							
NY	11-2792205	16 State wages, tips, etc. 16,444.2	25	17 State income tax 323.37	13 Loc	al wages, tips, etc.	19 Local in	come tax	20 Locality name
Copy 2 To Pa	Filed With Employee's State, City, or Local i								
~oby∠ io Be	гнеч vvitп =mpioyee's State, City, or Local I	ncome Tax				OMB No. 1545-0008		Deptofi	the Treasury-IRS

d Control		145544	8145544 0008	Void	1	name, address, and ZIP code NESS NEW HYDE PARK		Depar	tment of the Treasury - In No. 1545-0008	ternal Revenue Service
	s identificatio			social security number 10 - 2872	18810 UN	ION TURNPIKE				
13 Statute		Retire		Third-party	FLUSHING	. NY 11366		vraye	s, tips, other compensation 18458.14	2 Federal income tax withheld 905.61
emplo	yee	pian		sick pay				3 Socia	l security wages 18458.14	4 Social security tax withheld 1144.38
12 288 11	istrs. for 6	N	4 Other YPFL YSDI	49.87 18.60	, manage =	name, address, and ZIP code REJO		5 Medi	care wages and tips 18458.14	6 Medicare tax withheld 267.64
				10.00	50 MCKEE	STREET ARK. NY 11001		7 Socia	il security tips	8 Allocated tips
					I TORAL I.	AAA, NI 11001		10 Depe	ndent care benefits	11 Nonqualified plans
					<u>L</u>					
15 State		er's state	ID No.	16 State way	ges, tips, etc.	17 State income tax	18 Local wages, tips,	etc.	19 Local income tax	20 Locality name
NY	46503	6362 2		1	18458.14	653.11	18458.	14	461.10	NY NYC RES
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Form W-2 \	Wage	and	Tax	Statement	2020
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#### Copy B, to be filed with employees FEDERAL tax return

		14-081455 55440008 mber a Emple	44 Void  byee's social security number	PUSH FIT	name, address, and ZIP cod NESS NEW HYDE PARK		Depart OMB N	ment of the Treasury - In o. 1545-0008	ternal Revenue Service
3 Statu	6-5036362 utory lloyee	Retirement plan	01-90-2872 Third-party sick pay		ION TURNFIKE . NY 11366			s, tips, other compensation 18458.14 security wages	2 Federal income tax withheld 905.61 4 Social security tax withheld
2 See	instrs. for Box	12 14 Other NYPFL NYSDI	49.87 18.60	TERESA TO			7 Social	18458.14 are wages and tips 18458.14 security tips ident care benefits	1144.38 6 Medicare tax withheld 267.64 8 Allocated tips
5 State NY	Employer's 46503636	state ID No.	16 State wag	es, tips, etc. 8458.14	17 State income tax 653.11	18 Local wages, tips,		19 Local income tax 461.10	20 Locality name NY NYC RES

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 2020

#### Copy 2, to be filed with employees tax return for N

	r's identification	145544 number	a Employee's soc	Void ial security number	PUSH FIT	name, address, and ZIP coo NESS NEW HYDE PARI ION TURNPIKE		Departn OMB No	nent of the Treasury - In o. 1545-0008	ernal Revenue Service
3 Statu empi	oyee	Retir plan	101-90 ement	- 2872 Third-party sick pay		. NY 11366		L	tips, other compensation 18458.14 security wages 18458.14	2 Federal income tax withheld 905.61 4 Social security tax withheld
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State NY	Employe 465036	r's state i362 2	D No.	16 State wag	es, tips, etc. 8458.14	17 State income tax 653.11	18 Local wages, tips, 18458.	]	19 Local income tax 461.10	20 Locality name  NY NYC RES

his 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 2020

### Copy 2, to be filed with employees tax return for NYC RES

Employ	1455 ver's identification number		ocial security number	PUSH FITM	name, address, and ZIP code NESS NEW HYDE PARK ION TURNPIKE		Depa OM8	rtment of the Treasury - In No. 1545-0008	ternal Revenue Service
3 Stati	tutory Re ployee pla	tirement	0 - 2872 Third-party sick pay		NY 11366		L	18458.14 al security wages	2 Federal income tax withheld 905.61 4 Social security tax withheld
2 See	Instrs. for Box 12	14 Other NYPFL NYSDI	49.87 18.60	TERESA TE 50 MCKEE			7 Socia	18458.14 care wages and tips 18458.14 al security tips endent care benefits	1144.38 6 Medicare tax withheld 267.64 8 Allocated tips 11 Nonqualified plans
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This uncommuter is being turnished 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.

#### Employee Reference Copy Wage and Tax Copy C for employee's records. Dept. Statement Employer use only 000034 R6/FVH

Employer's name, address, and ZiP code BAGEL HUT INC 503 MIDDLE NECK ROAD GREAT NECK, NY 11023

Batch #90200

	ui ess,	ana zir ç
JOSE TREJO		
50 MCKEE		
FLORAL PARK,	NY	11001

L.			
b		oyer's FED ID number 11-2170000	a Employee's SSA number XXX - XX - 4496
1	Wag	es, tips, other comp.	2 Federal income tax withheld
Ļ.		9450.00	453.39
3	Socia	al security wages 9450.00	4 Social security tax withheld
5	Media	care wages and tips	6 Medicare tax withhold
			6 Medicare tax withheld
7	Cart	9450.00	137.03
	SOCIA	l security tips	8 Allocated tips
9			10 Dependent care benefits
11	Nonq	ualified plans	12a See instructions for box 12
14	Other		12b
		25.62 NY PFL	12c
		12.60 VPDi	12d
		_	13 Stat emp. Ret. plan 3rd party sick pa
	4.1	11-21/0000	p. 16 State wages, tips, etc. 9450.00
17	State	ncome tax	18 Local wages, tips, etc.
		279.30	2000: wages, ups, etc.
19	Local	income tax	20 Locality name

# 2020 W-2 and EARNINGS SUMMARY



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	Social Security	Medicare	NY. State Wage
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2
Gross Pay Reported W-2 Wages	9,450.00	9,450.00	9,450.00	9,450.00
	<b>9,450.00</b>	<b>9,450.00</b>	<b>9,450.00</b>	<b>9,450.00</b>

2. Employee Name and Address.

JOSE TREJO 50 MCKEE FLORAL PARK, NY 11001

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1	Wages, tips, other c 945	omp. 50.00	2 Feder	al income t	ax withheld 453 . 39
3	Social security wage 945	s 0.00	4 Social	security t	ax withheld 585.90
5		tips 0.00 ·	6 Medica	are tax wit	
	Control number 0034 R6/FVH	Dept.	Corp.	Employ	er use only 20

20 Locality name

BAGEL HUT INC 503 MIDDLE NECK ROAD GREAT NECK, NY 11023

	Employer's FED ID number 11 - 2170000	a Employee's SSA number XXX - XX - 4496
	Social security tips	8 Allocated tips
		10 Dependent care benefits
1 1	Nonqualified plans	12a See instructions for box 12
4	Other	12b
	25.62 NY PFL	12c
	12.60 VPDI	12d
		13 Stat emp. Ret. plan 3rd party sick pa
	Employee's name, address	
JO FL	SE TREJO MCKEE ORAL PARK, NY	11001
10 50 L 5 N	SE TREJO MCKEE ORAL PARK, NY State Employer's state ID n 11-2170000	11001 o. 16 State wages, tips, etc.
50 L 5 S	SE TREJO MCKEE ORAL PARK, NY State   Employer's state   D.n.	11001

Wage and Tax

Statement

94	2 Federal income tax withheld 453.39 4 Social security tax withheld 585.90 6 Medicare tax withheld 137.03			
3 Social security was 94				
5 Medicare wages and tips 9450.00				
d Control number	Dept	Corp.	Employ	er use only
000034 R6/FVH		_	A	20
c Employer's name, a	ddress, a	ind ZIP cod	le	
BAGEL H 503 MIDD GREAT N	LE NE	ECK RO	DAD	

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GREAT NECK, NY 11023

•	Employer's FED ID number 11-2170000	a Employee's SSA number XXX - XX - 4496
7	Social security tips	8 Allocated tips
		10 Dependent care benefits
1	Nonqualified plans	12a
14 Other 25.62 NY PFL 12.80 VPDI	Other	12b
	12c	
	12d	
		13 Stat emp. Ret. plan 3rd party sick

JOSE TREJO 50 MCKEE FLORAL PARK, NY 11001

15 State Employer's state ID no NY 11-2170000	.16 State wages, tips, etc. 9450.00
17 State income tax 279.30	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

NY.State Reference Copy Wage and Tax 2

Wages, tips, other comp.		2 Federal income tax withheld			
9450.00		453.39			
945	Social security wages 9450,00		4 Social security tax withheld 585,90		
Medicare wages and tips		6 Medicare tax withheld			
9450.00		137.03			
d Control number 000034 R6/FVH	Dept.	Corp.	Employer use only		

Employer's name, address, and ZIP code

BAGEL HUT INC 503 MIDDLE NECK ROAD GREAT NECK, NY 11023

a Employee's SSA number XXX-XX-4496
8 Allocated tips
10 Dependent care benefits
12a
12b
12c
12d
13 Stat emp. Ret. plan 3rd party si

JOSE TREJO 50 MCKEE FLORAL PARK, NY 11001

	4.1	11-21/0000	16 State wages, tips, etc. 9450 . 00
17	State	income tax	18 Local wages, tips, etc.
		279.30	Total Magos, ups, etc.
19	Local	income tax	20 Locality name

NY.State Filing Copy Wage and Tax ■ Statement Copy 2 to be filed with employee's State Income Tax Return