| Tax Return. | With Employee's FEDERA | Tax Year 2020 OMB No. 1545-0008 | Copy 2-To Be Filed | With Employee's State, Cit | ty, Tax Year 2020 |
|---|--|---|--|--|---|
| Employee's social security number 040-08-8714 | o-, ape, earler comp. | 2 Federal income tax withheld | or Local Income Tax a. Employee's social securit | x Return. ty 1 Wages, tips, other comp. | OMB No. 1545-0008 |
| b. Employer ID number | \$1,822.82 3 Social security wages | \$401.0 | number 040-08-8714 | \$1,822.82 | 2 Federal income tax withhel \$401.0 |
| 04-3376070 | \$1,822.82 | 4 Social security tax withheld \$113.0 | b. Employer ID number 04-3376070 | 3 Social security wages | 4 Social security tax withheld |
| d. Control number S0106086607 | 5 Medicare wages and tips | 6 Medicare tax withheld | d. Control number | \$1,822.82 5 Medicare wages and tips | \$113.0 |
| 7 Social security tips | \$1,822.82 8 Allocated tips | \$26.4 | | \$1,822.82 | \$26.4 |
| c. EMPLOYER'S name, addre | ess, and ZIP code | | 7 Social security tips | 8 Allocated tips | 9 |
| UNUM LIFE INSURAN AMERICA THIRD PAF 2211 CONGRESS STF PORTLAND, ME 0412 800-845-2290 e. EMPLOYEE'S name, addre IMRAN TAYYAB 2341 92ND ST EAST ELMHURST, NY | ICE COMPANY OF RTY PLANS REET 2 ss, and ZIP code | | c. EMPLOYER'S name, addi UNUM LIFE INSURAI AMERICA THIRD PA 2211 CONGRESS ST PORTLAND, ME 0412 800-845-2290 e. EMPLOYEE'S name, addr IMRAN TAYYAB 2341 92ND ST EAST ELMHURST, N | NCE COMPANY OF RTY PLANS 'REET 22 ress, and ZIP code | |
| 10 Dependent care benefits | 11 Nonqualified plans | See instructions for box 12 | 10 Dependent care benefits | 11 Nangualified when | -9-50 To 2010 To 2010 |
| Statutory employee | 14 Other | 12a | 10 | 11 Nonqualified plans | 12a |
| Retirement plan | | 12b 12c | 13 Statutory employee | 14 Other | 12b |
| Third-party sick pay | and the difference of the second | 12d 12e | Retirement plan | | 12c 12d |
| 5 State/Employer's state ID | 16 State wages, tips, etc. | | Third-party sick pay | | 12e |
| NY/04-3376070 | \$1,822.82 | 17 State income tax \$81.75 | 15 State/Employer's state ID NY/04-3376070 | 16 State wages, tips, etc. \$1,822.82 | 17 State income tax \$81.75 |
| 8 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| Copy C-For EMPLOYE | E'S RECORDS (See Notice | e Tax Year 2020 | Copy 2-To Be Filed W | ith Employee's State, City, | Tax Year 2020 |
| o Employee on the ba Employee's social security | t Wages time of the same | OMB No. 1545-0008 | or Local Income Tax F | Return. | OMB No. 1545-0008 |
| number 040-08-8714 | \$1.822.82 | 2 Federal income tax withheld \$401.02 | a. Employee's social security number 040-08-8714 | | 2 Federal income tax withheld |
| | 3 Social security wages | 4 Social security tax withheld | | \$1,822.82 3 Social security wages | \$401.02 |
| 04-3376070 Control number | \$1,822.82 5 Medicare wages and tips | \$113.01 | 04-3376070 | \$1,822.82 | 4 Social security tax withheld |
| S0106086607 | \$1,822.82 | 6 Medicare tax withheld | d. Control number | | \$112.01 |
| | | \$26.42 | | 5 Medicare wages and tips | \$113.01 6 Medicare tax withheld |
| EMPLOYER'S name, address | 8 Allocated tips | \$26.43 | S0106086607 | \$1,822.82 | 6 Medicare tax withheld \$26.43 |
| | B Allocated tips s, and ZIP code | | S0106086607 7 Social security tips | \$1,822.82 8 Allocated tips | 6 Medicare tax withheld |
| NUM LIFE INSURANCE MERICA THIRD PART 211 CONGRESS STRE ORTLAND, ME 04122 00-845-2290 EMPLOYEE'S name, address, MRAN TAYYAB 341 92ND ST | B Allocated tips and ZIP code E COMPANY OF Y PLANS ET | | S0106086607 7 Social security tips c. EMPLOYER'S name, address UNUM LIFE INSURANC AMERICA THIRD PART 2211 CONGRESS STR PORTLAND, ME 04122 800-845-2290 e. EMPLOYEE'S name, address IMRAN TAYYAB | \$1,822.82 8 Allocated tips s, and ZIP code CE COMPANY OF TY PLANS EET | 6 Medicare tax withheld \$26.43 |
| NUM LIFE INSURANCE MERICA THIRD PART 211 CONGRESS STRE ORTLAND, ME 04122 00-845-2290 EMPLOYEE'S name, address, MRAN TAYYAB 841 92ND ST AST ELMHURST, NY 1 Dependent care benefits 1: Statutory employee 1 Retirement plan 1 Third-party sick pay 1 State/Employer's state ID 16 | B Allocated tips a, and ZIP code E COMPANY OF Y PLANS ET and ZIP code 13691118 | | S0106086607 7 Social security tips c. EMPLOYER'S name, addres UNUM LIFE INSURANC AMERICA THIRD PART 2211 CONGRESS STRI PORTLAND, ME 04122 800-845-2290 e. EMPLOYEE'S name, address IMRAN TAYYAB 2341 92ND ST EAST ELMHURST, NY 10 Dependent care benefits 13 Statutory employee | \$1,822.82 8 Allocated tips s, and ZIP code CE COMPANY OF TY PLANS EET s, and ZIP code 113691118 | 6 Medicare tax withheld \$26.43 9 |
| NUM LIFE INSURANCE MERICA THIRD PART 211 CONGRESS STRE ORTLAND, ME 04122 00-845-2290 EMPLOYEE'S name, address, MRAN TAYYAB 341 92ND ST AST ELMHURST, NY 1 Dependent care benefits 1: Statutory employee | B Allocated tips a, and ZIP code E COMPANY OF Y PLANS ET and ZIP code 13691118 | See instructions for box 12 12a 12b 12c 12d 12e | S0106086607 7 Social security tips c. EMPLOYER'S name, addres UNUM LIFE INSURANC AMERICA THIRD PART 2211 CONGRESS STRI PORTLAND, ME 04122 800-845-2290 e. EMPLOYEE'S name, address IMRAN TAYYAB 2341 92ND ST EAST ELMHURST, NY 10 Dependent care benefits 13 Statutory employee | \$1,822.82 8 Allocated tips s, and ZIP code CE COMPANY OF TY PLANS EET s, and ZIP code 113691118 | 6 Medicare tax withheld \$26.43 9 |

Form W-2 Wage and Tax Statement Department of the Treasury - Internal Revenue Service 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

Department of the Treasury - Internal Revenue Service