0.53_69=20.55	b Employer identification	number (EIN) 46-30	88848	
a Employee's SSN 853-69-2055	1 Wgs, tips, other compn	2 Fed inc tax withheld	3 Social	OMB No. 1545-0008
c Employer's name, address, and ZIP code VITS CONSULTING CORP	73636.00	12001.00		Form W-2
	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
3350 ANNAPOLIS LANE N SUITE A	7 Social security tips	8 Allocated tips	9	Tax
PLYMOUTH MN 55447	10 Depdnt care benefits	11 Nonqualified plans		Statement
d Control number	10 Depart care benefits	1 1 Nonqualified plans	12a	2020
e Employee's name, address, and ZIP code Suff.	13	14 Other	12b	2020
	Statutory employee			
SAI MANDYALA 13401 LEGENDARY DRIVE APT 8201	Retirement plan		12c	Copy B To Be Filed with Employee's FEDERAL Tax Return
AUSTIN TX 78727	Third-party sick pay		12d	This information is being furnished to the Internal Revenue Service.
15   State   Employer's state ID number   16   State wages, tips, etc   3780.00	17 State income tax 173.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name
REV 01/19/21 QBDT			Den	artment of the Treasury —
<b>a</b> Employee's SSN 853-69-2055	<b>b</b> Employer identification	number (EIN) 46-30		OMB No. 1545-0008
C Employer's name, address, and ZIP code VITS CONSULTING CORP	1 Wgs, tips, other compn 73636.00	12001.00		Form W-2
3350 ANNAPOLIS LANE N	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and Tax
SUITE A PLYMOUTH MN 55447	7 Social security tips	8 Allocated tips	9	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2020
e Employee's name, address, and ZIP code Suff.	13	14 Other	12b	
SAI MANDYALA	Statutory employee		12c	Copy 2 To Be Filed With Employee's State
13401 LEGENDARY DRIVE APT 8201 AUSTIN TX 78727	Retirement plan		12d	City, or Local Income Tax
	Third-party sick pay	10		Return.
15 State   Employer's state ID No.   16 State wages, tips, etc   3780.00	17 State income tax 173.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name
REV 01/19/21 QBDT				
a Employee's SSN 853-69-2055	b Employer identification n	umber (EIN) 46-308	88848	OMB No. 1545-0008
Employer's name, address, and ZIP code	This information is being furnother sanction may be impos	ished to the IRS. If you are re ed on you if this income is tax	quired to file a tax return, a nable and you fail to report it.	egligence penalty or
VITS CONSULTING CORP	1 Wgs, tips, other compn 73636.00	2 Fed inc tax withheld 12001.00	3 Social security wages	Form W-2
3350 ANNAPOLIS LANE N SUITE A	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
PLYMOUTH MN 55447	7 Social security tips	8 Allocated tips	9	Tax
d Control No.	10 Depdnt care benefits	11 Nonqualified plans	12a	Statement
Employee's name, address, and ZIP code Suff.	13	14 Other	12b	2020
SAI MANDYALA	Statutory employee		12c	Copy C For EMPLOYEE'S
13401 LEGENDARY DRIVE APT 8201 AUSTIN TX 78727	Retirement plan		12d	RECORDS. (See Notice to
15 State Employer's state ID No. 16 State wages, tips, etc	Third-party sick pay  17 State income tax	18 Landings - 1	10 1	Employee.)  20 Locality name
15 State Employer's state ID No. MN   3213474   16 State wages, tips, etc   3780.00	173.00	18 Local wages, tips, etc	19 Local income tax	ZO Locality name

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15 State Employer's state ID No. MN 3213474