

| | | | | | | |
|--|---------------------------|---|---------------------|--|-----------------------------------|--|
| b Employer's Identification number c Employer's name, address, and ZIP code | | 47-2438655 EXTENDIME SOFTWARE SOLUTIONS INC 1816 ENGLISHTOWN ROAD SUITE 203-B OLD BRIDGE NJ 08857 | | 12a See instructions for Box 12 | 1 Wages, tips, other compensation | 2 Federal income tax withheld |
| | | | | \$ | 67656.10 | 5815.09 |
| | | | | 12b | 3 Social security wages | 4 Social security tax withheld |
| | | | | \$ | | |
| | | | | 12c | 5 Medicare wages and tips | 6 Medicare tax withheld |
| | | | | \$ | | |
| | | | | 12d | 7 Social security tips | 8 Allocated tips |
| | | | | \$ | | |
| e Employee's first name and initial Last name | | 5445432 | | 9 | | 10 Dependent care benefits |
| SRINATH KOTAGIRI 1937 PINEHURST CT ALLENTOWN PA 18109 | | | | 11 Nonqualified plans | | 13 Statutory employee Retirement plan Third-party sick pay |
| | | | | 14 Other PA SUI EE | | 40.58 |
| f Employee's address and ZIP code | | | | a Employee's soc. sec. no 504-71-5319 | | |
| 15 State | Employer's state I.D. No. | 16 State wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| PA | 20065000 | 67656.10 | 2077.01 | | | |

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

| | | | | | | |
|--|---------------------------|---|---------------------|--|-----------------------------------|--|
| b Employer's Identification number c Employer's name, address, and ZIP code | | 47-2438655 EXTENDIME SOFTWARE SOLUTIONS INC 1816 ENGLISHTOWN ROAD SUITE 203-B OLD BRIDGE NJ 08857 | | 12a See instructions for Box 12 | 1 Wages, tips, other compensation | 2 Federal income tax withheld |
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| | | | | 12b | 3 Social security wages | 4 Social security tax withheld |
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| | | | | 12c | 5 Medicare wages and tips | 6 Medicare tax withheld |
| | | | | \$ | | |
| | | | | 12d | 7 Social security tips | 8 Allocated tips |
| | | | | \$ | | |
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| | | | | 14 Other PA SUI EE | | 40.58 |
| f Employee's address and ZIP code | | | | a Employee's soc. sec. no 504-71-5319 | | |
| 15 State | Employer's state I.D. No. | 16 State wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| PA | 20065000 | 67656.10 | 2077.01 | | | |

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

REV 01/26/21 OSP

| | | | | | | |
|--|---------------------------|---|---------------------|--|-----------------------------------|--|
| b Employer's Identification number c Employer's name, address, and ZIP code | | 47-2438655 EXTENDIME SOFTWARE SOLUTIONS INC 1816 ENGLISHTOWN ROAD SUITE 203-B OLD BRIDGE NJ 08857 | | 12a See instructions for Box 12 | 1 Wages, tips, other compensation | 2 Federal income tax withheld |
| | | | | \$ | 67656.10 | 5815.09 |
| | | | | 12b | 3 Social security wages | 4 Social security tax withheld |
| | | | | \$ | | |
| | | | | 12c | 5 Medicare wages and tips | 6 Medicare tax withheld |
| | | | | \$ | | |
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| f Employee's address and ZIP code | | | | a Employee's soc. sec. no 504-71-5319 | | |
| 15 State | Employer's state I.D. No. | 16 State wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| PA | 20065000 | 67656.10 | 2077.01 | | | |

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

| | | | | | | |
|--|---------------------------|---|---------------------|--|-----------------------------------|--|
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| 15 State | Employer's state I.D. No. | 16 State wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| PA | 20065000 | 67656.10 | 2077.01 | | | |

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C For Employee's Records