Copy B To Be Filed V FEDERAL Tax Return		202	20	OMB No. 1545-0008				
a Employee's social	1 Wages	s, tips, other comp.	2 Federal income tax withheld					
security number		66019.68 4013.76						
205-35-4281	3 Social	security wages						
<b>b</b> Employer ID number		66019.68	4093.22					
68-0281955	5 Medica	are wages and tips 66019.68	6 Medicare tax withheld 957.29					
c Employer's name, addre	ss and 7IP		957.29					
	•		т.					
Sonata Software North America Inc.								
39300 Civic	Cente	er Drive						
Ste 270								
Fremont, CA 94538								
d Control Number								
ODSI 648 GOVINDASWAMI RAMALIN								
e Employee's first name a	na initiai	Last name						
RAMALINGAM G GOVINDASWAMI								
116 Preston Woods Trail								
Sandy Springs, GA 30338								
f Employee's address, and ZIP code								
7 Social security tips		Illocated tips	9					
10 Dependent care benefits	11 1	11 Nonqualified plans				for box 12		
12.01.1.1				L b Code	35	5.00		
13 Statutory employee	14 Other		12	b Code				
Retirement plan	Retirement plan 12c Code							
r totaloment plan			12C Code					
Third-party sick pay				12d Code				
GA 2194596-	-CX	66019.68	2780.28			80.28		
15 State Emplr.'s state I.D.	#	16 State wages, tips, etc.		17 State income tax				
		Local income tax		20 Locality name				
Form W-2 Wage and Tay St	-4	·		Dont	of the T	reasury - IRS		

Dept. of the Treasury - IRS

Form W-2 Wage and Tax Statement This information is being furnished to the Internal Revenue Service

Copy C For EMPLOYEE'S RECORDS OMB No. 1545-0008 (See Notice to Employee on back of Copy B.) 2 Federal income tax withheld a Employee's social 1 Wages, tips, other comp. security number 66019.68 4013.76 205-35-4281 3 Social security wages 4 Social security tax withheld 66019.68 4093.22 **b** Employer ID number 68-0281955 6 Medicare tax withheld 5 Medicare wages and tips 66019.68 957.29 c Employer's name, address, and ZIP code Sonata Software North America Inc. 39300 Civic Center Drive Ste 270 Fremont, CA 94538 d Control Number GOVINDASWAMI RAMALIN ODSI 648 e Employee's first name and initial Last name GOVINDASWAMI RAMALINGAM G 116 Preston Woods Trail Sandy Springs, GA 30338 f Employee's address, and ZIP code 8 Allocated tips 7 Social security tips 12a Code See inst. for box 12 10 Dependent care benefits 11 Nonqualified plans L 35.00 13 Statutory employee 14 Other 12b Code Retirement plan 12c Code Third-party sick pay 12d Code 2194596-CX 66019.68 GΑ 2780.28 15 State Emplr.'s state I.D. # 18 Local wages, tips, etc. 16 State wages, tips, etc.
19 Local income tax 17 State income tax 20 Locality name

Form W-2 Wage and Tax Statement Dept. of the Treasur This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it. Dept. of the Treasury - IR:

Extra Employee Copy

Copy 2 To Be Filed V City, or Local Incom	20	OMB No. 1545-000				
a Employee's social	1 Wag	ges, tips, other comp.	2 Federal income tax withheld			
security number		66019.68	4013.76			
205-35-4281	3 Soci	al security wages				
<b>b</b> Employer ID number		66019.68	4093.22			
68-0281955	5 Med	icare wages and tips	<b>6</b> Medicare tax withheld 957.29			
		66019.68				
c Employer's name, addr	ess, and Z	IP code				
Sonata Soft	ware	North America	Inc.			
39300 Civic	Cent	er Drive				
Ste 270						
	0453	0				
Fremont, CA d Control Number	9433	0				
ODSI 648		GOVINDASWAMI F	ΔΜΔΤ.ΤΝ			
e Employee's first name a	11.00.1		WITHWITH			
116 Preston Sandy Sprin f Employee's address, ar	gs, G	GA 30338				
7 Social security tips		Allocated tips	9			
10 Dependent care benefit	ts <b>1</b> 1	Nonqualified plans	12a Code See inst. for b			
			L	35.00		
13 Statutory employee	14 Other	er 12b Code				
Retirement plan			12c Code			
redicilient plan			1			
·			424 Ccda			
Third-party sick pay			12d Code			
	-CX	66019.68	12d Code	2780.28		
Third-party sick pay	-CX	66019.68	12d Code			
Third-party sick pay  GA 2194596  15 State Empir.'s state I.E.	). #	16 State wages, tips, etc.	17 Stat	2780.28 e income tax		
Third-party sick pay	). #			2780.28 e income tax		
Third-party sick pay  GA 2194596  15 State Empir.'s state I.E.	). #	16 State wages, tips, etc.	17 Stat	2780.28 e income tax		

Extra Employee Copy		202	20	OMB No. 1545-0008			
a Employee's social	1 Wages	s, tips, other comp.	2 Federal income tax withheld				
security number		66019.68	4013.76				
205-35-4281	3 Social security wages			4 Social security tax withheld			
<b>b</b> Employer ID number	66019.68			4093.22			
68-0281955	5 Medicare wages and tips			6 Medicare tax withheld			
		66019.68	957.29				
c Employer's name, addres	s, and ZIP	code					
Sonata Softw	are N	Iorth America	Ιr	nc.			
39300 Civic	Cente	er Drive					
Ste 270							
Fremont, CA	94538	}					
d Control Number		001111010111111		T T . T			
ODSI 648		GOVINDASWAMI F	KAMA	TTN			
e Employee's first name and	d initial	Last name					
RAMALINGAM G	GC	VINDASWAMI					
116 Preston	Woods	Trail					
Sandy Spring	s, GA	30338					
f Employee's address, and	9						
7 Social security tips	8 A	8 Allocated tips					
10 Dependent care benefits	11 1	11 Nonqualified plans			See inst	t. for box 12	
10 Dependent date benefits	"	toriquamica piario	1	<b>a</b> 0000 L		5.00	
13 Statutory employee 14	1 Other		12	<b>b</b> Code			
Retirement plan			12	c Code			
Third-party sick pay			42	d Code			
Third-party sick pay	12	<b>a</b> Code					
GA 2194596-	CX	66019.68			27	80.28	
15 State Emplr.'s state I.D. #		16 State wages, tips, etc.	17 State income tax			ax	
18 Local wages, tips, etc.	19 L	19 Local income tax		20 Locality name			
Form W-2 Wage and Tax Sta	tement			Dent	of the T	reasury - IR:	

OMB No.