0943 - 12075537 000000103 -		Employer's name, address, and ZIP code TEKORG INC	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
· ·	69-5252	22636 GLENN DR STE 203 STERLING VA 20164	1 Wages, tips, 3 Social secu	29090.00	2 Federal income tax withheld 2931.49 4 Social security tax withheld		
See Instrs. for Box 12 14 Other		Employee's name, address, and ZIP code SATEESH REDDY VEMIREDDY 4801 GUS ECKERT RD SAN ANTONIO TX 78240	5 Medicare wages and tips 7 Social security tips 10 Dependent care benefits		6 Medicare tax withheld 8 Allocated tips 11 Nonqualified plans		
State Employer's state ID No.	16 State wage		18 Local wages, tips,		ocal income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2020

1 Control number 0943-1207 00000001	03-	c Employer's name, address, and ZIP code TEKORG INC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 46-1311390 13 Statutory Retirement plan	Employee's social security number 878-69-5252 Third-party sick pay	22636 GLENN DR STE 203 STERLING VA 20164		1 Wages, tips, other compensation 29090.00 3 Social security wages	2 Federal income tax withheld 2931.49			
12 See Instrs. for Box 12 14 0	Other	e Employee's name, address, and ZIP code SATEESH REDDY VEMIREDDY 4801 GUS ECKERT RD SAN ANTONIO TX 78240		5 Medicare wages and tips 7 Social security tips 10 Dependent care benefits	6 Medicare tax withheld 8 Allocated tips 11 Nongualified plans			
15 State Employer's state ID N	do. 16 State was	es, tips, etc. 17 State income tax	18 Local wages, tips,		20 Locality name			

This information 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 tail to report it.

Form W-2 Wage and Tax Statement 2020

d Control number Employer's identification number [a Employee's social security	х	c Employer's name, address, and ZIP code	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
D curbusha a meminamon manunan S curbusha accent accent A i			1 Wages, tips, other compensation	2 Federal income tax withheld		
13 Statutory Retirement Third-party employee plan sick pay			3 Social security wages	4 Social security tax withheld		
12 See Instrs. for Box 12 14 Other		Employee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld		
	1		7 Social security tips	8 Allocated tips		
			10 Dependent care benefits	11 Nonqualified plans		
15 State Employer's state ID No. 16 Sta	ate wage	is, tips, etc. 17 State income tax 18 Local wages, tips,	etc. 19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2020

d Control number Void X					х	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number a Employee's social security number					1 Wages,	tips, other compensation	2 Federal inco	2 Federal income tax withheld					
13 s	tatutory mployee	Aetirer plan	nent	Third-party sick pay						3 Social	security wages		urity tax withheld
12 Se	2 See Instrs. for Box 12 14 Other			e Employee's name, address, and ZIP code			5 Medica	ire wages and tips	6 Medicare tax withheld				
										7 Social security tips		8 Allocated tips	
										10 Dependent care benefits		11 Nonqualifi	ed plans
15 Stat	Employer	's state II	No.	16 Sta	te wag	jes, tips, etc.	17 State income tax		18 Local wages, tips,	etc.	19 Local income tax	20 Local	ity name