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|---|---|--|------------------------|
| Employee Reference Copy W-2 Wage and Tax Statement Copy C for employee's records. | | 2020 OMB No. 1545-0008 | |
| d Control number 000208 | Dept. R4/FLJ | Corp. | Employer use only 7 |
| c Employer's name, address, and ZIP code TEKINVADERZ LLC 2490 E OAKTON ST STE A ARLINGTON HEIGHTS, IL 60005 Batch #90892 | | | |
| e/f Employee's name, address, and ZIP code VAMSI KRISHNA BANDI 250 MAIN ST APT 218 HARTFORD, CT 06156 | | | |
| b Employer's FED ID number 46-5582856 | a Employee's SSA number XXX-XX-2770 | | |
| 1 Wages, tips, other comp. 87032.00 | 2 Federal income tax withheld 13480.05 | | |
| 3 Social security wages | 4 Social security tax withheld | | |
| 5 Medicare wages and tips | 6 Medicare tax withheld | | |
| 7 Social security tips | 8 Allocated tips | | |
| 9 | 10 Dependent care benefits | | |
| 11 Nonqualified plans | 12a See instructions for box 12 | | |
| 14 Other | 12b | | |
| | 12c | | |
| | 12d | | |
| | 13 Stat emp | Ret. plan | 3rd party sick pay |
| 15 State CT | Employer's state ID no. 72468739-000 | 16 State wages, tips, etc. 87032.00 | |
| 17 State income tax 6083.55 | | 18 Local wages, tips, etc. | |
| 19 Local income tax | | 20 Locality name | |

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

| | Wages, Tips, other Compensation Box 1 of W-2 | Social Security Wages Box 3 of W-2 | Medicare Wages Box 5 of W-2 | CT. State Wages, Tips, Etc. Box 16 of W-2 |
|---------------------------|---|---------------------------------------|--------------------------------|--|
| Gross Pay | 87,500.00 | 87,500.00 | 87,500.00 | 87,500.00 |
| Less Other Cafe 125 | 468.00 | N/A | N/A | 468.00 |
| Reported W-2 Wages | 87,032.00 | 0.00 | 0.00 | 87,032.00 |

2. Employee Name and Address.

**VAMSI KRISHNA BANDI
250 MAIN ST
APT 218
HARTFORD, CT 06156**

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| d Control number 000208 | Dept. R4/FLJ | Corp. | Employer use only 7 |
| c Employer's name, address, and ZIP code TEKINVADERZ LLC 2490 E OAKTON ST STE A ARLINGTON HEIGHTS, IL 60005 | | | |
| b Employer's FED ID number 46-5582856 | a Employee's SSA number XXX-XX-2770 | | |
| 7 Social security tips | 8 Allocated tips | | |
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| 14 Other | 12b | | |
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| | 12d | | |
| | 13 Stat emp | Ret. plan | 3rd party sick pay |
| e/f Employee's name, address and ZIP code VAMSI KRISHNA BANDI 250 MAIN ST APT 218 HARTFORD, CT 06156 | | | |
| 15 State CT | Employer's state ID no. 72468739-000 | 16 State wages, tips, etc. 87032.00 | |
| 17 State income tax 6083.55 | | 18 Local wages, tips, etc. | |
| 19 Local income tax | | 20 Locality name | |
| Federal Filing Copy W-2 Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. | | 2020 OMB No. 1545-0008 | |

| | | | |
|---|---|--|------------------------|
| 1 Wages, tips, other comp. 87032.00 | 2 Federal income tax withheld 13480.05 | | |
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| 11 Nonqualified plans | 12a | | |
| 14 Other | 12b | | |
| | 12c | | |
| | 12d | | |
| | 13 Stat emp | Ret. plan | 3rd party sick pay |
| e/f Employee's name, address and ZIP code VAMSI KRISHNA BANDI 250 MAIN ST APT 218 HARTFORD, CT 06156 | | | |
| 15 State CT | Employer's state ID no. 72468739-000 | 16 State wages, tips, etc. 87032.00 | |
| 17 State income tax 6083.55 | | 18 Local wages, tips, etc. | |
| 19 Local income tax | | 20 Locality name | |
| CT.State Reference Copy W-2 Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return. | | 2020 OMB No. 1545-0008 | |

| | | | |
|---|---|--|------------------------|
| 1 Wages, tips, other comp. 87032.00 | 2 Federal income tax withheld 13480.05 | | |
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| d Control number 000208 | Dept. R4/FLJ | Corp. | Employer use only 7 |
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| CT.State Filing Copy W-2 Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return. | | 2020 OMB No. 1545-0008 | |



W-2 Employee Reference Copy
Wage and Tax Statement
2020
OMB No. 1545-0008

Copy C for employee's records.

| | | | |
|------------------|-------|-------|-------------------|
| d Control number | Dept. | Corp. | Employer use only |
| 000250 R4/FLJ | | | A 8 |

c Employer's name, address, and ZIP code
TEKINVADERZ LLC
 2490 E OAKTON ST STE A
 ARLINGTON HEIGHTS, IL 60005

Batch #90892

e/f Employee's name, address, and ZIP code
VAMSI KRISHNA BANDI
 250 MAIN ST
 APT 218
 HARTFORD, CT 06106

| | |
|----------------------------|-------------------------|
| b Employer's FED ID number | a Employee's SSA number |
| 46-5582856 | XXX-XX-2770 |

| | |
|----------------------------------|---|
| 1 Wages, tips, other comp. | 2 Federal income tax withheld |
| 4345.00 | 672.11 |
| 3 Social security wages | 4 Social security tax withheld |
| 4345.00 | 269.39 |
| 5 Medicare wages and tips | 6 Medicare tax withheld |
| 4345.00 | 63.00 |
| 7 Social security tips | 8 Allocated tips |
| | |
| 9 | 10 Dependent care benefits |
| | |
| 11 Nonqualified plans | 12a See instructions for box 12 |
| | |
| 14 Other | 12b |
| | 12c |
| | 12d |
| | 13 Stat emp. Ret. plan 3rd party sick pay |
| | |
| 15 State Employer's state ID no. | 16 State wages, tips, etc. |
| CT 72468739-000 | 4345.00 |
| 17 State income tax | 18 Local wages, tips, etc. |
| 303.72 | |
| 19 Local income tax | 20 Locality name |
| | |

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

| | Wages, Tips, other Compensation Box 1 of W-2 | Social Security Wages Box 3 of W-2 | Medicare Wages Box 5 of W-2 | CT. State Wages, Tips, Etc. Box 16 of W-2 |
|---------------------------|---|---------------------------------------|--------------------------------|--|
| Gross Pay | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 |
| Less Other Cafe 125 | 155.00 | 155.00 | 155.00 | 155.00 |
| Reported W-2 Wages | 4,345.00 | 4,345.00 | 4,345.00 | 4,345.00 |

2. Employee Name and Address.

VAMSI KRISHNA BANDI
 250 MAIN ST
 APT 218
 HARTFORD, CT 06106

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| 1 Wages, tips, other comp. | 2 Federal income tax withheld |
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| | 13 Stat emp. Ret. plan 3rd party sick pay |
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e/f Employee's name, address and ZIP code
VAMSI KRISHNA BANDI
 250 MAIN ST
 APT 218
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| | |
|----------------------------------|----------------------------|
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| CT 72468739-000 | 4345.00 |
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Federal Filing Copy
W-2 Wage and Tax Statement
 2020
 OMB No. 1545-0008
 Copy B to be filed with employee's Federal Income Tax Return.

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| 1 Wages, tips, other comp. | 2 Federal income tax withheld |
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W-2 Wage and Tax Statement
 2020
 OMB No. 1545-0008
 Copy 2 to be filed with employee's State Income Tax Return.

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