<b>b Employer's Identification number</b> $85 - 2722473$	12a See Instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	7500.00	129.99
UNICON SYSTEMS INC.	12b	3 Social security wages	4 Social security tax withheld
UNICON SISIEMS INC.	\$	7500.00	465.00
	12c	5 Medicare wages and tips	6 Medicare tax withheld
1212 CORPORATE DR	\$	7500.00	108.75
	12d	7 Social security tips	8 Allocated tips
IRVING TX 75038	ls		
e Employee's first name and initial Last name		9	10 Dependent care benefits
14493736	This information is being furnished to the Internal Revenue Service		
		11 Nongualified plans	13 Statutory Retirement Third-party employee plan sick pay
GAYATHRI KASOJJALA	Copy B To Be Filed with		employee plan sick pay
7348 PARKRIDGE BLVD	• •		
	Employee's FEDERAL	14 Other	
	Tax Return		
IRVING TX 75038			
	a Employee's soc. sec. no		
f Employee's address and ZIP code	031-02-2024		
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
+			
Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	Vith Employee's FEDERAL Tax Return
2020			

b Employer's Identification number 85-2722473	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	7500.00	129.99
UNICON SYSTEMS INC.	12b	3 Social security wages	4 Social security tax withheld
UNICON BIBIENS INC.	\$	7500.00	465.00
1212 CORPORATE DR	12c	5 Medicare wages and tips	6 Medicare tax withheld
	\$	7500.00	108.75
	12d	7 Social security tips	8 Allocated tips
IRVING TX 75038	\$		
e Employee's first name and initial Last name		9	10 Dependent care benefits
14493736			
	Comy 2 for State City or	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
GAYATHRI KASOJJALA	Copy 2 for State, City, or		employee plan sick pay
7348 PARKRIDGE BLVD	Local Tax Departments		
1340 PARKRIDGE BLVD		14 Other	
IRVING TX 75038	a Employee's soc. sec. no		
f Employee's address and ZIP code	031-02-2024		
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
	1		
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 ST	ATE, CITY, or LOCAL Tax Departments

REV 01/07/21 OSP

b Employer's Identification number c Employer's name, address, and ZIP code 85-2722473	12a See instructions for Box 12 \$	1 Wages, tips, other compensation 7500.00	2 Federal income tax withheld 129.99
UNICON SYSTEMS INC.	12b	3 Social security wages	4 Social security tax withheld
	\$	7500.00	465.00
1212 CORPORATE DR	12c	5 Medicare wages and tips	6 Medicare tax withheld
	\$	7500.00	108.75
	12d	7 Social security tips	8 Allocated tips
IRVING TX 75038	\$		
e Employee's first name and initial Last name		9	10 Dependent care benefits
14493736			
GAYATHRI KASOJJALA	Copy 2 for State, City, or	11 Nongualified plans	13 Statutory Retirement Third-party plan sick pay
7348 PARKRIDGE BLVD	Local Tax Departments		
1340 PARKRIDGE BUVD		14 Other	
IRVING TX 75038	a Employee's soc. sec. no	-	
	0.31 - 0.2 - 2.0.24	4	
f Employee's address and ZIP code 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
		F	
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 ST	ATE, CITY, or LOCAL Tax Departments

b Employer's Identification number 85-2722473	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	7500.00	129.99
UNICON SYSTEMS INC.	12b	3 Social security wages	4 Social security tax withheld
UNICON SISTEMS INC.	\$	7500.00	465.00
	12c	5 Medicare wages and tips	6 Medicare tax withheld
1212 CORPORATE DR	\$	7500.00	108.75
	12d	7 Social security tips	8 Allocated tips
IRVING TX 75038	\$		
e Employee's first name and initial Last name	This information is being furnished to the	9	10 Dependent care benefits
14493736	Internal Revenue Service. If you are required to file a tax return, a negligence		
GAYATHRI KASOJJALA		11 Nongualified plans	13 Statutory Retirement Third-party plan sick pay
7348 PARKRIDGE BLVD			
		14 Other	
IRVING TX 75038	Records (see notice to Employee on back.) a Employee's soc. sec. no		
f Employee's address and ZIP code	031-02-2024		
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