	. 1 /	b Employer identification r	umber (EIN) 51-048		OMB No. 1545-0008
C Employer's name, address, and ZIP code MUDIAM INC		1 Wgs, tips, other compn 33800.00	2 Fed inc tax withheld 3531.00	3 Social security wages 33800.00	Form W-2
7211 REGENCY SQUARE BLVD.,		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
SUITE # 221		2095.60 7 Social security tips	33800.00 8 Allocated tips	490.10	Tax
HOUSTON TX 77036		, ,	·		Statement
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a	2020
e Employee's name, address, and ZIP code Suff.		13	14 Other	12b	2020
RAAGINI ALEKHYA SWARNA		Statutory employee .		12c	Capy B To Bo Filed with
3222 VELVET ROSE ST		Retirement plan			Copy B To Be Filed with Employee's FEDERAL Tax Return
LAS VEGAS NV 89135				12d	This information is being furnished to the Internal Revenue Service.
15 State Employer's state ID number	16 State wages, tips, etc	Third-party sick pay 17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
					_
REV 12/22/20 QBDT	<u> </u>			 Depar	 rtment of the Treasury — IRS
a Employee's SSN 778-81-61		b Employer identification r	1 '		OMB No. 1545-0008
Employer's name, address, and ZIP coom MUDIAM INC	le	1 Wgs, tips, other compn 33800.00	2 Fed inc tax withheld 3531.00	3 Social security wages 33800.00	Form W-2
7211 REGENCY SQUARE BLVD.,		4 SS tax withheld 2095.60	5 Medicare wages & tips 33800.00	6 Medicare tax withheld 490.10	Wage and
SUITE # 221		7 Social security tips	8 Allocated tips	9	Tax
HOUSTON TX d Control number	77036	10 Depdnt care benefits	11 Nonqualified plans	12a	Statement
GONITO HUMBET		To bepart care benefits	1 1 Nonqualined plans		2020
e Employee's name, address, and ZIP code Suff.		13 Statutory employee.	14 Other	12b	Comu a To Bo
RAAGINI ALEKHYA SWARNA		Statutory employee:		Copy 2 To Be Filed With	Filed With
	NA	_			
3222 VELVET ROSE ST		Retirement plan			Employee's State, City, or Local
		Retirement plan		12d	
3222 VELVET ROSE ST	89135		18 Local wages, tips, etc		City, or Local Income Tax
3222 VELVET ROSE ST LAS VEGAS NV	89135	Third-party sick pay	18 Local wages, tips, etc	12d	City, or Local Income Tax Return.
3222 VELVET ROSE ST LAS VEGAS NV 15 State Employer's state ID No. REV 12/22/20 QBDT	89135 16 State wages, tips, etc	Third-party sick pay 17 State income tax		12d 19 Local income tax	City, or Local Income Tax Return.
3222 VELVET ROSE ST LAS VEGAS NV 15 State Employer's state ID No. REV 12/22/20 QBDT a Employee's SSN 778-81-61 c Employer's name, address, and ZIP coc	89135 16 State wages, tips, etc	Third-party sick pay 17 State income tax b Employer identification of This information is being furnition.		12d 19 Local income tax	City, or Local Income Tax Return. 20 Locality name
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