

| | | | | | | | |
|---|--|----------------------|--|--|---|--|--|
| a Employee's social security number 577-45-6916 | b Employer identification number (EIN) 73-1465867 | OMB No. 1545-0008 | COPY B To Be Filed with Employee's FEDERAL Tax Return. Visit the IRS at www.irs.gov/efile . | | 1 Wages, tips, other compensation 74062.84 | 2 Federal income tax withheld 2467.00 | |
| c Employer's name, address, and ZIP code Protech Solutions, Inc. 303 W Capitol Ave Ste. 330 Little Rock, AR 72201 | | | d Control number 0374585 | 3 Social security wages 80948.37 | 4 Social security tax withheld 5018.80 | | |
| | | | 7 Social security tips | 5 Medicare wages and tips 80948.37 | 6 Medicare tax withheld 1173.75 | | |
| | | | 10 Dependent care benefits | 8 Allocated tips | 9 | | |
| e Employee's name, address and ZIP code Bhanu Prakash R Dereddy 202 Congressional Circle Little Rock, AR 72210 | | | 11 Nonqualified plans | 12a See instructions for box 12 D 6885.53 | 14 Other | | |
| | | | 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/> | 12c | | | |
| | | | This information is being furnished to the Internal Revenue Service. | | | | 12d |
| | | | 15 State AR | Employer's state ID number 12301087WHW | | | 16 State wages, tips, etc. 74062.84 |

Form W-2 Wage and Tax Statement 2020

Department of the Treasury—Internal Revenue Service

File for free at irs.gov/efile

freefile

IT'S FAST IT'S SAFE IT'S FREE

| | | | | | | | |
|---|--|----------------------|--|--|---|--|--|
| a Employee's social security number 577-45-6916 | b Employer identification number (EIN) 73-1465867 | OMB No. 1545-0008 | COPY 1 To Be Filed with Employee's State, City or Local Income Tax Return. | | 1 Wages, tips, other compensation 74062.84 | 2 Federal income tax withheld 2467.00 | |
| c Employer's name, address, and ZIP code Protech Solutions, Inc. 303 W Capitol Ave Ste. 330 Little Rock, AR 72201 | | | d Control number 0374585 | 3 Social security wages 80948.37 | 4 Social security tax withheld 5018.80 | | |
| | | | 7 Social security tips | 5 Medicare wages and tips 80948.37 | 6 Medicare tax withheld 1173.75 | | |
| | | | 10 Dependent care benefits | 8 Allocated tips | 9 | | |
| e Employee's name, address and ZIP code Bhanu Prakash R Dereddy 202 Congressional Circle Little Rock, AR 72210 | | | 11 Nonqualified plans | 12a See instructions for box 12 D 6885.53 | 14 Other | | |
| | | | 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/> | 12c | | | |
| | | | This information is being furnished to the Internal Revenue Service. | | | | 12d |
| | | | 15 State AR | Employer's state ID number 12301087WHW | | | 16 State wages, tips, etc. 74062.84 |

Form W-2 Wage and Tax Statement 2020

Department of the Treasury—Internal Revenue Service

File for free at irs.gov/efile

freefile

IT'S FAST IT'S SAFE IT'S FREE

| | | | | | | | |
|---|--|----------------------|--|--|---|--|--|
| a Employee's social security number 577-45-6916 | b Employer identification number (EIN) 73-1465867 | OMB No. 1545-0008 | COPY 2 To Be Filed with Employee's State, City or Local Income Tax Return. | | 1 Wages, tips, other compensation 74062.84 | 2 Federal income tax withheld 2467.00 | |
| c Employer's name, address, and ZIP code Protech Solutions, Inc. 303 W Capitol Ave Ste. 330 Little Rock, AR 72201 | | | d Control number 0374585 | 3 Social security wages 80948.37 | 4 Social security tax withheld 5018.80 | | |
| | | | 7 Social security tips | 5 Medicare wages and tips 80948.37 | 6 Medicare tax withheld 1173.75 | | |
| | | | 10 Dependent care benefits | 8 Allocated tips | 9 | | |
| e Employee's name, address and ZIP code Bhanu Prakash R Dereddy 202 Congressional Circle Little Rock, AR 72210 | | | 11 Nonqualified plans | 12a See instructions for box 12 D 6885.53 | 14 Other | | |
| | | | 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/> | 12c | | | |
| | | | This information is being furnished to the Internal Revenue Service. | | | | 12d |
| | | | 15 State AR | Employer's state ID number 12301087WHW | | | 16 State wages, tips, etc. 74062.84 |

Form W-2 Wage and Tax Statement 2020

Department of the Treasury—Internal Revenue Service

File for free at irs.gov/efile

freefile

IT'S FAST IT'S SAFE IT'S FREE

| | | |
|-------------------|---|--|
| d Control Number | 1 Wages, tips, other compensation 11481.08 | 2 Federal income tax withheld .00 |
| OMB NO. 1545-0008 | 3 Social security wages 11481.08 | 4 Social security tax withheld 711.83 |
| | 5 Medicare wages and tips 11481.08 | 6 Medicare tax withheld 166.50 |

c Employer's name, address and ZIP code
PULASKI COUNTY SPEC SCHOOL DIS
PO BOX 8601
LITTLE ROCK, AR 72216-8601

| | | |
|-----------------------------------|------------------------------|---|
| 7 Social security tips .00 | 8 Allocated tips .00 | 9 |
| 10 Dependent care benefits .00 | 11 Nonqualified plans .00 | 12a See instructions for box 12 DD 1964.16 |
| 12b .00 | 12c .00 | 12d .00 |

b Employer identification number (EIN)
71-6021158

a Employee's social security number
324-83-1327

| | | | | | |
|-----------------------|-----------------|----------------------|----------|------|------|
| 13 Statutory employee | Retirement plan | Third-party sick pay | 14 Other | CAFE | 5.34 |
| | X | | | .00 | .00 |

e Employee's name, address and ZIP code
PRAVALLIKA DEREDDY
202 CONGRESSIONAL CIR
LITTLE ROCK, AR 72210

This information is being furnished 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 fail to report it.

| | | |
|-----------------|--|---|
| 2020 | 15 State Employer's state ID No. AR 12262425WHW | 16 State wages, tips, etc. 11481.08 .00 |
| Form W-2 | 17 State income tax 161.99 .00 | 18 Local wages, tips, etc. .00 .00 |
| | 19 Local income tax .00 | 20 Locality name .00 |

Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

| | | |
|-------------------|---|--|
| d Control Number | 1 Wages, tips, other compensation 11481.08 | 2 Federal income tax withheld .00 |
| OMB NO. 1545-0008 | 3 Social security wages 11481.08 | 4 Social security tax withheld 711.83 |
| | 5 Medicare wages and tips 11481.08 | 6 Medicare tax withheld 166.50 |

c Employer's name, address and ZIP code
PULASKI COUNTY SPEC SCHOOL DIS
PO BOX 8601
LITTLE ROCK, AR 72216-8601

| | | |
|-----------------------------------|------------------------------|---|
| 7 Social security tips .00 | 8 Allocated tips .00 | 9 |
| 10 Dependent care benefits .00 | 11 Nonqualified plans .00 | 12a See instructions for box 12 DD 1964.16 |
| 12b .00 | 12c .00 | 12d .00 |

b Employer identification number (EIN)
71-6021158

a Employee's social security number
324-83-1327

| | | | | | |
|-----------------------|-----------------|----------------------|----------|------|------|
| 13 Statutory employee | Retirement plan | Third-party sick pay | 14 Other | CAFE | 5.34 |
| | X | | | .00 | .00 |

e Employee's name, address and ZIP code
PRAVALLIKA DEREDDY
202 CONGRESSIONAL CIR
LITTLE ROCK, AR 72210

| | | |
|-----------------|--|---|
| 2020 | 15 State Employer's state ID No. AR 12262425WHW | 16 State wages, tips, etc. 11481.08 .00 |
| Form W-2 | 17 State income tax 161.99 .00 | 18 Local wages, tips, etc. .00 .00 |
| | 19 Local income tax .00 | 20 Locality name .00 |

Copy B - To Be Filed With Employee's FEDERAL Tax Return

| | | |
|-------------------|---|--|
| d Control Number | 1 Wages, tips, other compensation 11481.08 | 2 Federal income tax withheld .00 |
| OMB NO. 1545-0008 | 3 Social security wages 11481.08 | 4 Social security tax withheld 711.83 |
| | 5 Medicare wages and tips 11481.08 | 6 Medicare tax withheld 166.50 |

c Employer's name, address and ZIP code
PULASKI COUNTY SPEC SCHOOL DIS
PO BOX 8601
LITTLE ROCK, AR 72216-8601

| | | |
|-----------------------------------|------------------------------|---|
| 7 Social security tips .00 | 8 Allocated tips .00 | 9 |
| 10 Dependent care benefits .00 | 11 Nonqualified plans .00 | 12a See instructions for box 12 DD 1964.16 |
| 12b .00 | 12c .00 | 12d .00 |

b Employer identification number (EIN)
71-6021158

a Employee's social security number
324-83-1327

| | | | | | |
|-----------------------|-----------------|----------------------|----------|------|------|
| 13 Statutory employee | Retirement plan | Third-party sick pay | 14 Other | CAFE | 5.34 |
| | X | | | .00 | .00 |

e Employee's name, address and ZIP code
PRAVALLIKA DEREDDY
202 CONGRESSIONAL CIR
LITTLE ROCK, AR 72210

| | | |
|-----------------|--|---|
| 2020 | 15 State Employer's state ID No. AR 12262425WHW | 16 State wages, tips, etc. 11481.08 .00 |
| Form W-2 | 17 State income tax 161.99 .00 | 18 Local wages, tips, etc. .00 .00 |
| | 19 Local income tax .00 | 20 Locality name .00 |

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

| | | |
|-------------------|---|--|
| d Control Number | 1 Wages, tips, other compensation 11481.08 | 2 Federal income tax withheld .00 |
| OMB NO. 1545-0008 | 3 Social security wages 11481.08 | 4 Social security tax withheld 711.83 |
| | 5 Medicare wages and tips 11481.08 | 6 Medicare tax withheld 166.50 |

c Employer's name, address and ZIP code
PULASKI COUNTY SPEC SCHOOL DIS
PO BOX 8601
LITTLE ROCK, AR 72216-8601

| | | |
|-----------------------------------|------------------------------|---|
| 7 Social security tips .00 | 8 Allocated tips .00 | 9 |
| 10 Dependent care benefits .00 | 11 Nonqualified plans .00 | 12a See instructions for box 12 DD 1964.16 |
| 12b .00 | 12c .00 | 12d .00 |

b Employer identification number (EIN)
71-6021158

a Employee's social security number
324-83-1327

| | | | | | |
|-----------------------|-----------------|----------------------|----------|------|------|
| 13 Statutory employee | Retirement plan | Third-party sick pay | 14 Other | CAFE | 5.34 |
| | X | | | .00 | .00 |

e Employee's name, address and ZIP code
PRAVALLIKA DEREDDY
202 CONGRESSIONAL CIR
LITTLE ROCK, AR 72210

| | | |
|-----------------|--|---|
| 2020 | 15 State Employer's state ID No. AR 12262425WHW | 16 State wages, tips, etc. 11481.08 .00 |
| Form W-2 | 17 State income tax 161.99 .00 | 18 Local wages, tips, etc. .00 .00 |
| | 19 Local income tax .00 | 20 Locality name .00 |

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

CORRECTED (if checked)

| | | | |
|---|--|---|------------------------------------|
| This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. | | OMB No. 1545-0120 2020 Form 1099-G | Certain Government Payments |
| Copy B for Recipient | | | |
| PAYER'S TIN 71-6006690 | | RECIPIENT'S TIN XXX-XX-1327 | |
| PAYER'S Name, Address, ZIP Code & Telephone Number Arkansas Division of Workforce Services P.O. Box 2981 Little Rock AR 72203-2981 Phone: (501) 682-3206 | | | |
| RECIPIENT'S Name, Address & ZIP Code PRAVALLIKA DEREDDY 202 CONGRESSIONAL CR LITTLE ROCK AR 72210 | | | |
| Account number (see instructions) | | | |
| 1 Unemployment Compensation \$5,631.00 | 2 State or local income tax refunds, credits, or offsets | 3 Box 2 amount is for tax year | |
| 4 Federal income tax withheld \$555.00 | 5 RTAA payments \$0.00 | 6 Taxable grants | |
| 7 Agriculture payments | 8 If checked, box 2 is trade or business income <input type="checkbox"/> | 9 Market gain | |
| 10a State AR | 10b State identification no. 71-6006690 | 11 State income tax withheld \$0.00 | |
| Form 1099-G (keep for your records) www.irs.gov/Form1099G Department of the Treasury - Internal Revenue Service | | | |

VOID

CORRECTED

| | | | |
|---|---|---|------------------------------------|
| To be filed with recipient's state income tax return, when required. | | OMB No. 1545-0120 2020 Form 1099-G | Certain Government Payments |
| Copy 2 | | | |
| PAYER'S TIN 71-6006690 | | RECIPIENT'S TIN XXX-XX-1327 | |
| PAYER'S Name, Address, ZIP Code & Telephone Number Arkansas Division of Workforce Services P.O. Box 2981 Little Rock AR 72203-2981 Phone: (501) 682-3206 | | | |
| RECIPIENT'S Name, Address & ZIP Code PRAVALLIKA DEREDDY 202 CONGRESSIONAL CR LITTLE ROCK AR 72210 | | | |
| Account number (see instructions) | | | |
| 1 Unemployment Compensation \$5,631.00 | 2 State or local income tax refunds, credits, or offsets | 3 Box 2 amount is for tax year | |
| 4 Federal income tax withheld \$555.00 | 5 RTAA payments \$0.00 | 6 Taxable grants | |
| 7 Agriculture payments | 8 Check if box 2 is trade or business income <input type="checkbox"/> | 9 Market gain | |
| 10a State AR | 10b State identification no. 71-6006690 | 11 State income tax withheld \$0.00 | |
| Form 1099-G Department of the Treasury - Internal Revenue Service | | | |

CUT HERE

CUT HERE

CUT HERE

| | | | | |
|-------------------------------------|--------------------|--------------------|------------------------------|--------------------|
| Box 1 includes these amounts | TRA: \$0.00 | DUA: \$0.00 | Child Support: \$0.00 | PUA: \$0.00 |
|-------------------------------------|--------------------|--------------------|------------------------------|--------------------|

Processed on 01/17/2021

IT IS NOT NECESSARY TO SEND A COPY TO THE IRS.

If you have a question about the amount you were paid, call (501) 682-3206.

If you have a question about any amount you may have repaid, call (501) 682-3241 and select 5 from the menu.

If you did not file this claim, please contact the Fraud Hotline at (501) 682-1058 or email ADWS.InternalAudit@arkansas.gov.

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer has assigned to distinguish your account.

Box 1. Shows the total unemployment compensation paid to you this year. Combine the box 1 amounts from all Forms 1099-G and report the total as income on the unemployment compensation line of your tax return. Except as explained below, this is your taxable amount. If you are married filing jointly, each spouse must figure his or her taxable amount separately. If you expect to receive these benefits in the future, you can ask the payer to withhold federal income tax from each payment. Or, you can make estimated tax payments. For details, see Form 1040-ES. If you made contributions to a governmental unemployment compensation program or to a governmental paid family leave program and received a payment from that program, the payer must issue a separate Form 1099-G to report this amount to you. If you itemize deductions, you may

deduct your contributions on Schedule A (Form 1040 or 1040-SR) as taxes paid. If you do not itemize, you only need to include in income the amount that is in excess of your contributions.

Boxes 2-3. Not Applicable.

Box 4. Shows backup withholding or withholding you requested on unemployment compensation, Commodity Credit Corporation (CCC) loans, or certain crop disaster payments. Generally, a payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9 for information on backup withholding. Include this amount on your income tax return as tax withheld.

Box 5. Shows reemployment trade adjustment assistance (RTAA) payments you received. Include on the "Other income" line of Schedule 1 (Form 1040 or 1040-SR).

Boxes 6-9. Not Applicable.

Boxes 10a-11. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-G and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099G.

FOR MORE INFORMATION, SEE THE INSTRUCTIONS FOR YOUR FEDERAL & STATE INCOME TAX RETURN.

*** Servicios de Interpretación/Traducción disponibles por medio de su oficina local. --- Ewōr Jerbal in ukok ikijien jeje im kennaan ilo opij ko ijo kwoj pād ie.

--- Các Dịch Vụ Thông Dịch/Phiên Dịch có sẵn qua văn phòng địa phương của quý vị.---

ທ້ອງຖານປະຈຳທ້ອງຖິ່ນຂອງທ່ານໃຫ້ບໍລິການມາພາສາລາວລາວກະສາດ--- Interpretation/Translation services available through your local office.***

NORTHWEST FEDERAL CREDIT UNION
 220 SPRING STREET
 HERNDON, VA 20170

IMPORTANT TAX RETURN INFORMATION BELOW

BHANU PRAKASH REDDY DEREDDY
 202 CONGRESSIONAL CIR
 LITTLE ROCK, AR 72210

CORRECTED (if checked)

| | | | | |
|--|--|---|---|--|
| RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. NORTHWEST FEDERAL CREDIT UNION 220 SPRING STREET HERNDON, VA 20170 703-709-8900 | | * <i>Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.</i> | OMB No. 1545-1380 <h2>2020</h2> Form 1098 | <h3>Mortgage Interest Statement</h3> |
| RECIPIENT'S/LENDER'S TIN 53-0216888 | PAYER'S/BORROWER'S TIN *****6916 | 1 Mortgage interest received from payer(s)/borrower(s)* \$ 5,234.26 | COPY B For Payer/Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6, or because you didn't report the refund of interest (box 4); or because you claimed a non-deductible item. | |
| PAYER'S/BORROWER'S name BHANU PRAKASH REDDY DEREDDY Street address (including apt. no.) 202 CONGRESSIONAL CIR City or town, state or province, country, and ZIP or foreign postal code LITTLE ROCK, AR 72210 | | 2 Outstanding mortgage principal \$ 146,721.02 | | 3 Mortgage origination date 11/08/2019 |
| | | 4 Refund of overpaid interest \$ 0.00 | | 5 Mortgage insurance premiums \$ 0.00 |
| | | 6 Points paid on purchase of principal residence \$ 0.00 | | |
| 9 Number of properties securing the mortgage | 10 Other | 7 If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8. <input checked="" type="checkbox"/> | | |
| Account number (see instructions) 6110264626 | | 8 Address or description of property securing mortgage (see instructions) | 11 Mortgage acquisition date | |

Form 1098

(keep for your records)

www.irs.gov/Form1098

Department of the Treasury-Internal Revenue Service

Additional Information Regarding Your Account

| | | |
|----------------------------------|---------------------------------|---------------------------------|
| Principal Balance: \$ 140,376.19 | Taxes Paid YTD: \$ 2,178.60 | Late Chgs Pd YTD: \$ 0.00 |
| T & I Balance: \$ 1,086.44 | Principal Paid YTD: \$ 6,344.83 | Haz/Fid Ins Pd YTD: \$ 1,179.00 |
| Int on T & I YTD: \$ 0.32 | Int on Loss Draft YTD: \$ 0.00 | |

U S BANK NA
 RETAIL BANKING EP-MN-WS5A
 P O BOX 64799
 ST PAUL MN 55164-0799



E.I.N. 31-0841368

800-872-2657
 0001 0300 3031

Page 1 of 1

000484659 01 AV 0.389 106481290362298 P Y
 BHANU PRAKASH DEREDDY
 202 CONGRESSIONAL CIR
 LITTLE ROCK AR 72210-2832

| |
|--------------|
| FOR TAX YEAR |
| 2020 |

| |
|--------------------|
| TAXPAYER ID NUMBER |
| XXX-XX-6916 |

2020 - 1098, MORTGAGE INTEREST STATEMENT

| | | |
|----------------------------|---|------------|
| | ACCOUNT NUMBER | |
| EQUILINE | 0300 AR0000700039468 | |
| BOX 1 | MORTGAGE INTEREST* | 222.09 |
| BOX 3 | MORTGAGE ORIGATION DATE | 12/01/2014 |
| BOX 7 | ADDRESS OF PROPERTY SECURING MORTGAGE IS THE SAME AS PAYER'S/BORROWER'S ADDRESS.....YES | |
| TOTAL INTEREST/POINTS PAID | | 222.09 |

Form 1098 - Copy B - For Payer/Borrower

The information in boxes 1 through 10 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a non-deductible item.

* Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.

Form 1098-E - Copy B - For Borrower

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.

Please note, this form will indicate the state where you resided when you received the income, paid the interest expense, or were party to the transaction being reported on this statement. The state identification number and state tax withheld may display on this statement, even if there is a zero amount. Unless state tax was actually withheld from the payment, the line for state tax withheld will reflect ".00" and the state identification number may be blank.