

<b>b Employer's Identification number</b>		37-1852089		<b>12a See instructions for Box 12</b>	<b>1 Wages, tips, other compensation</b>	<b>2 Federal income tax withheld</b>
<b>c Employer's name, address, and ZIP code</b>		PETABYTZ TECHNOLOGIES INC. 8 THE GREEN STE 8137 DOVER DE 19901		\$	13796.50	1295.62
<b>e Employee's first name and initial</b>		Last name 9993433		<b>12b</b>	<b>3 Social security wages</b>	<b>4 Social security tax withheld</b>
SAMANTH K CHINTALA 777 S MATHILDA AVE APT# 268 SUNNYVALE CA 94086		f Employee's address and ZIP code		\$		
<b>15 State</b>		<b>Employer's state I.D. No.</b>		<b>12c</b>	<b>5 Medicare wages and tips</b>	<b>6 Medicare tax withheld</b>
CA	097-3087-0	13796.50	676.18	\$		
<b>16 State wages, tips, etc.</b>		<b>17 State income tax</b>		<b>12d</b>	<b>7 Social security tips</b>	<b>8 Allocated tips</b>
				\$		
Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service				OMB # 1545-0008		Copy B To Be Filed With Employee's FEDERAL Tax Return

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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 STATE, CITY, or LOCAL Tax Departments

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Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service				OMB # 1545-0008		Copy C For Employee's Records