To the right is an explanation of the contents of the wage boxes on your W-2. Please note that the Gross amount shown may include adjustments.				F	ederal Bo	Soc. Sec.	E Medicare B
			Gross Wages 25840.0 Txbl Benefits Group Term Lif Adoption Deferred Comp			25840.0	0 25840.00
			W-2 Wag	etax/Wage ges	25840.0	•)] (25840.00]
D. CONTROL NUMBER This Information is 0010048429(to the Internal Rev		NO. 1545-0008	1. WAGES, TIP	s, OTHER COMPENS. 25840.		2. FEDERAL INCOME TAX	3283.15
B. EMPLOYER IDENTIFICATION NUMBER 36-3984423	A. EMPLOYEE'S SOCIAL SECURITY NU 349-45-7131	JMBER	3. SOCIAL SEC		.00	4. SOCIAL SECURITY TA	
Probys 2400 Meadowbrook Pkwy Duluth GA 30096			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD	
			7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	
			9.			10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Siva Pavani Chittapragada 4444 Central Ave Unit 117			11. NONQUALIFIED PLANS			12.a-d	
			14. OTHER CA SDI 258.40				
Fremont CA 94536						13. STATUTORY RETIRE PLAN	SICK PAY
USATE EMPLOYER'S STATE I.D. NO. CA 428-9627-4	16. STATE WAGES, TIPS, ETC. 25840.00	17. STATE INCOME T $oldsymbol{1}$	358.12	18. LOCAL WAGES,	TIPS, ETC. 19.1	OCAL INCOME TAX	20. LOCALITY NAME
D. CONTROL NUMBER This Information	is being furnished		1. WAGES, TIP	S, OTHER COMPENS.	ATION	2. FEDERAL INCOME TAX	(WITHHELD
0010048429(to the Internal Re			25840.00			3283.15	
36-3984423	349-45-7131	JWIDEN					
c. employer's name, address, and zip code Probys 2400 Meadowbrook Pkwy Duluth GA 30096			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD	
			7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	
			9.			10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Siva Pavani Chittapragada 4444 Central Ave Unit 117 Fremont CA 94536 EMPLOYEE'S ADDRESS AND 210 CODE			11. NONQUALIF	IED PLANS		12.a-d	
			14. OTHER CA SDI 258.40				
						13. STATUTORY RETIREMENT THIRD PARTY	
F. EMPLOYEE'S ADDRESS AND 21P CODE USATE EMPLOYER'S STATE I.D. NO.	16. STATE WAGES, TIPS, ETC.	17. STATE INCOME T	AX	18. LOCAL WAGES,	TIPS, ETC. 19.1	OCAL INCOME TAX	20. LOCALITY NAME
CA 428-9627-4 Copy 2 To be filed with Employe	25840.00 ee's STATE, CITY, or LOCAL t		358.12 2020		Dept. of th	e Treasury - Interr	nal Revenue Service
FORM W-2 Wage and Tax S	Statement		2020				
D. CONTROL NUMBER This Information i to the Internal Re		NO. 1545-0008	1. WAGES, TIP	s, OTHER COMPENS. 25840.		2. FEDERAL INCOME TAX	WITHHELD 3283.15
B. EMPLOYER IDENTIFICATION NUMBER	YER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER		3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD	
6-3984423 349-45-7131 . EMPLOYER'S NAME, ADDRESS, AND ZIP CODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD	
Probys 2400 Meadowbrook Pkwy			7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	
Duluth GA 30096		9.		10. DEPENDENT CARE BENEFITS			
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME SUFF.		11. NONQUALIFIED PLANS		12.a-d		
Siva Pavani	Chittapragada		^{14. OTHER} CA SDI 258.40				
4444 Central Ave Unit 117			CA	SDI	258.40		
Fremont CA 94536						13. STATUTORY RETIRE	SICK PAY
USATE EMPLOYER'S STATE I.D. NO. 428-9627-4	16. STATE WAGES, TIPS, ETC. 25840.00	17. STATE INCOME T $oldsymbol{1}$	358.12	18. LOCAL WAGES,	TIPS, ETC. 19. I	OCAL INCOME TAX	20. LOCALITY NAME
Copy 2 To be filed with Employer FORM W-2 Wage and Tax 5		ax return	2020		Dept. of t	he Treasury - Inter	rnal Revenue Servic
D. CONTROL NUMBER This Information i to the Internal Re		NO. 1545-0008	1. WAGES, TIP	s, OTHER COMPENS. 25840.		2. FEDERAL INCOME TAX	3283.15
B. EMPLOYER IDENTIFICATION NUMBER	A. EMPLOYEE'S SOCIAL SECURITY NU	JMBER	3. SOCIAL SEC		.00	4. SOCIAL SECURITY TA	
36-3984423 349-45-7131 c. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Probys 2400 Meadowbrook Pkwy Duluth GA 30096			5. MEDICARE WAGES AND TIPS		6. MEDICARE TAX WITHHELD		
			7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS		
			9.		10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUALIF	IED PLANS		12.a-d	
Siva Pavani Chittapragada							
4444 Central Ave Unit 117			14. OTHER CA	SDI	258.40		
Fremont CA 94536 code						13. STATUTORY RETIRE PLAN	SICK PAY
CA EMPLOYER'S STATE I.D. NO. 428-9627-4	16. STATE WAGES, TIPS, ETC. 25840.00	17. STATE INCOME T	358.12	18. LOCAL WAGES,	TIPS, ETC. 19.1	OCAL INCOME TAX	20. LOCALITY NAME
CA 420-3027-4							