									Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5	
		explanation of the Gross amou				Gross Wages 115457.7 Txbl Benefits			78 115457.7	8 115457.78		
						Group Tern	n Life	141.	57 141.5	7 141.57		
							Adoption					
							Deferred Comp (6927.48)					
							Section 125	5				
							Other Preta	x/Wage Limit		(19200.23	3) (19200.23)	
							W-2 Wages	;	108671.	.87 96399.1	.2 96399.12	
D. CONTROL N 0001689105	CONTROL NUMBER This Information is being furnished to the Internal Revenue Service			2020	омв по.	1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 108671.87			2. FEDERAL INCOME TAX WITHHELD 19192.21		
B. EMPLOYER	IDENTIFICAT	TION NUMBER	A. EMPLOYEE'S	SOCIAL SECUI	RITY NUMBER	R	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD		
95-2775732	2		861-02-4376					9639		5976.75		
		DDRESS, AND ZIP C					5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WITH		
Environmen 380 New Yo		ns Research Inst	itute Inc						99.12		1397.79	
Redlands CA							7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
							9.			10. DEPENDENT CARE B	ENEFITS	
E. EMPLOYEE'		ME AND INITIAL	LAST NA			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	141.57	
Sukeshreddy Kasireddy									D	6927.48		
1176 Woodbury Ln Mentone CA 92359 USA						14. OTHER CA	A SDI	1154.57	DD	5712.00		
F. EMPLOYEE'S ADDRESS AND ZIP CODE										13. STATUTORY RETIRI	MENT X THIRD PARTY SICK PAY	
15. STATE		STATE I.D. NO.	16. STATE WAG	108671.8		TATE INCOME T	7514.01	18. LOCAL WAGES,	TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	

D. CONTROL 000168910		This Information is to the Internal Rev		2020	OMB NO	. 1545-0008	1. WAGES, T	WAGES, TIPS, OTHER COMPENSATION 108671.87			2. FEDERAL INCOME TAX WITHHELD 19192.21		
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER								CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD			
95-2775732 861-02-4376							96399.12				5976.75		
C. EMPLOYER	C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE								5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD	
Environmer	Environmental Systems Research Institute Inc								6399.12		1397.79		
380 New York St Redlands CA 92373						7. SOCIAL SECURITY TIPS				8. ALLOCATED TIPS			
											10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE	'S FIRST NAM	IE AND INITIAL	LAST N			SUFF.	11. NONQUALIFIED PLANS				12.a-d C	141.57	
Sukeshredo	dy		Kasire	ddy							D	6927.48	
Mentone C	1176 Woodbury Ln Mentone CA 92359							14. OTHER CA SDI 1154.57			DD	5712.00	
F. EMPLOYEE	F. EMPLOYEE'S ADDRESS AND ZIP CODE										13. STATUTORY RETIR	REMENT X THIRD PARTY SICK PAY	
15. STATE	EMPLOYER'S	STATE I.D. NO.	16. STATE WAG	ES, TIPS, E	TC. 17.	STATE INCOME T	ΓAX	18. LOCAL WAG	ES, TIPS, ETC.	19.	LOCAL INCOME TAX	20. LOCALITY NAME	
CA	215-8029	-5		108671	.87		7514.01						

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2020

Dept. of the Treasury - Internal Revenue Service

## FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 000168910501		This Information is being furnished to the Internal Revenue Service		OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 108671.87			2. FEDERAL INCOME TAX WITHHELD 19192.21			
B. EMPLOYER IDENTIFI	CATION NUMBER	A. EMPLOYEE'S	SOCIAL SECU	JRITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD			
95-2775732		861-02-4376			96399.12			5976.75			
C. EMPLOYER'S NAME,	ADDRESS, AND ZIP C	ODE			5. MEDICARE	5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD		
Environmental Syst	ems Research Inst	itute Inc				9639	99.12		1397.79		
380 New York St Redlands CA 92373						7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
					9.			10. DEPENDENT CARE BENEFITS			
E. EMPLOYEE'S FIRST N	AME AND INITIAL	LAST NA	AME	SUFF.	11. NONQUALIFIED PLANS			12.a-d C	141.57		
Sukeshreddy		Kasireddy						D	6927.48		
1176 Woodbury Ln Mentone CA 92359 USA					14. OTHER CA	SDI	1154.57	DD	5712.00		
F. EMPLOYEE'S ADDRE	SS AND ZIP CODE							13. STATUTORY RETI	REMENT X THIRD PARTY SICK PAY		
15. STATE EMPLOYE CA 215-80	r's state i.d. no. 29-5	16. STATE WAG	ES, TIPS, ET 108671.		TAX 7514.01	18. LOCAL WAGES,	TIPS, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY NAME		

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Dept. of the Treasury - Internal Revenue Service

## FORM W-2 Wage and Tax Statement

D. CONTROL	. NUMBER	This Information is	This Information is being furnished		ONAR NO. 1545 0000	1. WAGES, T	PS, OTHER COMPENSAT	ION	2. FEDERAL INCOME TA	2. FEDERAL INCOME TAX WITHHELD	
000168910	0501	to the Internal Rev	enue Service	2020	OMB NO. 1545-0008	108671.87				19192.21	
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD	
95-2775732 861-02-4376						96399.12				5976.75	
C. EMPLOYE	R'S NAME, A	DDRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WIT	6. MEDICARE TAX WITHHELD	
		ns Research Inst	itute Inc			96399.12				1397.79	
	380 New York St Redlands CA 92373						CURITY TIPS		8. ALLOCATED TIPS		
							9.			10. DEPENDENT CARE BENEFITS	
E. EMPLOYE	E'S FIRST NAM	ME AND INITIAL	LAST N	AME	SUFF.	11. NONQUALIFIED PLANS			12.a-d C	141.57	
Sukeshred	ldy		Kasire	ddy					D	6927.48	
1176 Woodbury Ln Mentone CA 92359						14. OTHER CA	SDI	1154.57	, DD	5712.00	
USA F. EMPLOYE	E'S ADDRESS	AND ZIP CODE							13. STATUTORY RETII	REMENT X THIRD PARTY SICK PAY	
15. STATE		S STATE I.D. NO.	16. STATE WAG				18. LOCAL WAGES, TIP	S, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	
CA	215-8029	)-5		108671.	87	7514.01					