

a Employee's social security no. 599-67-3017		b Employer identification number (EIN) 47-1662481		Copy B—To Be Filed With Employee's FEDERAL Tax Return.				OMB No. 1545-0008							
c Employer's name, address, and ZIP code EXCELTECHIES LLC 2750 DULUTH HWY #2 DULUTH, GA 30096				95291.66		14480.00									
				1 Wages, tips, other compensation		2 Federal income tax withheld		3 Social security wages		4 Social security tax withheld					
				95291.66		878.34		5 Medicare wages and tips		6 Medicare tax withheld					
d Control number				95291.66		205.42		7 Social security tips		8 Allocated tips		9			
				10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12		12b Code		12c Code		12d Code	
e Employee's name, address, and ZIP code PREM CHAND RACHARLA 234 PRESTON WOODS TRL ATLANTA, GA 30338				13		14 Other									
				Statutory employee		Retirement plan		Third-party sick pay							
15 State Employer's state ID number GA 47-1662481		16 State wages, tips, etc. 95291.66		17 State income tax 4819.00		18 Local wages, tips, etc.		19 Local income tax		20 Locality name					

Form W-2 Wage and Tax Statement 2020

This information is being furnished to the Internal Revenue Service.

Department of the Treasury - Internal Revenue Service

a Employee's social security no. 599-67-3017		b Employer identification number (EIN) 47-1662481		Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return				OMB No. 1545-0008							
c Employer's name, address, and ZIP code EXCELTECHIES LLC 2750 DULUTH HWY #2 DULUTH, GA 30096				95291.66		14480.00									
				1 Wages, tips, other compensation		2 Federal income tax withheld		3 Social security wages		4 Social security tax withheld					
				95291.66		878.34		5 Medicare wages and tips		6 Medicare tax withheld					
d Control number				95291.66		205.42		7 Social security tips		8 Allocated tips		9			
				10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12		12b Code		12c Code		12d Code	
e Employee's name, address, and ZIP code PREM CHAND RACHARLA 234 PRESTON WOODS TRL ATLANTA, GA 30338				13		14 Other									
				Statutory employee		Retirement plan		Third-party sick pay							
15 State Employer's state ID number GA 47-1662481		16 State wages, tips, etc. 95291.66		17 State income tax 4819.00		18 Local wages, tips, etc.		19 Local income tax		20 Locality name					

Form W-2 Wage and Tax Statement 2020

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a Employee's social security no. 599-67-3017		b Employer identification number (EIN) 47-1662481		Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)				OMB No. 1545-0008							
c Employer's name, address, and ZIP code EXCELTECHIES LLC 2750 DULUTH HWY #2 DULUTH, GA 30096				95291.66		14480.00									
				1 Wages, tips, other compensation		2 Federal income tax withheld		3 Social security wages		4 Social security tax withheld					
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e Employee's name, address, and ZIP code PREM CHAND RACHARLA 234 PRESTON WOODS TRL ATLANTA, GA 30338				13		14 Other									
				Statutory employee		Retirement plan		Third-party sick pay							
15 State Employer's state ID number GA 47-1662481		16 State wages, tips, etc. 95291.66		17 State income tax 4819.00		18 Local wages, tips, etc.		19 Local income tax		20 Locality name					

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