



|  |                                 |                            |                    |                                |  |
|--|---------------------------------|----------------------------|--------------------|--------------------------------|--|
| <b>W-2</b>   |                                 | Employee Reference Copy    |                    | <b>2020</b>                    |  |
| Wage and Tax Statement   |                                 | OMB No. 1545-0008          |                    | Copy C for employee's records. |  |
| d Control number   | Dept.                           | Corp.                      | Employer use only  |                                |  |
| 000515 ATLA/MMU  |                                 |                            | A 3                |                                |  |
| c Employer's name, address, and ZIP code                                   |                                 |                            |                    |                                |  |
| MICRONET IT SOLUTIONS<br>INC<br>3057 PEACHTREE IND BLVD<br>DULUTH GA 30097 |                                 |                            |                    |                                |  |
| Batch #04232   |                                 |                            |                    |                                |  |
| e/f Employee's name, address, and ZIP code                                 |                                 |                            |                    |                                |  |
| TANOOJ CHANDRA ADDAGUDU<br>3415 WEST HILLSBOROUGH AVENUE<br>TAMPA FL 33614 |                                 |                            |                    |                                |  |
| b Employer's FED ID number   | a Employee's SSA number         |                            |                    |                                |  |
| 58-2483162   | XXX-XX-1178                     |                            |                    |                                |  |
| 1 Wages, tips, other comp.   | 2 Federal income tax withheld   |                            |                    |                                |  |
| 64222.56   | 7810.87                         |                            |                    |                                |  |
| 3 Social security wages  | 4 Social security tax withheld  |                            |                    |                                |  |
| 5 Medicare wages and tips  | 6 Medicare tax withheld         |                            |                    |                                |  |
| 7 Social security tips   | 8 Allocated tips                |                            |                    |                                |  |
| 9  | 10 Dependent care benefits      |                            |                    |                                |  |
| 11 Nonqualified plans  | 12a See instructions for box 12 |                            |                    |                                |  |
| 14 Other   | 12b                             |                            |                    |                                |  |
|  | 12c                             |                            |                    |                                |  |
|  | 12d                             |                            |                    |                                |  |
|  | 13 Stat emp.                    | Ret. plan                  | 3rd party sick pay |                                |  |
| 15 State   | Employer's state ID no.         | 16 State wages, tips, etc. |                    |                                |  |
| OH   | 52-6125679                      | 48061.44                   |                    |                                |  |
| 17 State income tax  | 18 Local wages, tips, etc.      |                            |                    |                                |  |
| 1448.28  |                                 |                            |                    |                                |  |
| 19 Local income tax  | 20 Locality name                |                            |                    |                                |  |

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

|                           | Wages, Tips, other Compensation<br>Box 1 of W-2 | Social Security Wages<br>Box 3 of W-2 | Medicare Wages<br>Box 5 of W-2 | OH. State Wages, Tips, Etc.<br>Box 16 of W-2 |
|---------------------------|---|---------------------------------------|--------------------------------|--|
| Gross Pay                 | 64,222.56                                       | 64,222.56                             | 64,222.56                      | 48,061.44                                    |
| Less Exempt Wages         |   | N/A                                   | 64,222.56                      | N/A  |
| <b>Reported W-2 Wages</b> | <b>64,222.56</b>                                | <b>0.00</b>                           | <b>0.00</b>                    | <b>48,061.44</b>                             |

2. Employee Name and Address.

TANOOJ CHANDRA ADDAGUDU  
3415 WEST HILLSBOROUGH AVENUE  
TAMPA FL 33614

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|  |                                 |                            |                    |   |  |
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| 64222.56   | 7810.87                         |                            |                    |   |  |
| 3 Social security wages  | 4 Social security tax withheld  |                            |                    |   |  |
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| MICRONET IT SOLUTIONS<br>INC<br>3057 PEACHTREE IND BLVD<br>DULUTH GA 30097 |                                 |                            |                    |   |  |
| b Employer's FED ID number   | a Employee's SSA number         |                            |                    |   |  |
| 58-2483162   | XXX-XX-1178                     |                            |                    |   |  |
| 7 Social security tips   | 8 Allocated tips                |                            |                    |   |  |
| 9  | 10 Dependent care benefits      |                            |                    |   |  |
| 11 Nonqualified plans  | 12a See instructions for box 12 |                            |                    |   |  |
| 14 Other   | 12b                             |                            |                    |   |  |
|  | 12c                             |                            |                    |   |  |
|  | 12d                             |                            |                    |   |  |
|  | 13 Stat emp.                    | Ret. plan                  | 3rd party sick pay |   |  |
| e/f Employee's name, address and ZIP code                                  |                                 |                            |                    |   |  |
| TANOOJ CHANDRA ADDAGUDU<br>3415 WEST HILLSBOROUGH AVENUE<br>TAMPA FL 33614 |                                 |                            |                    |   |  |
| 15 State   | Employer's state ID no.         | 16 State wages, tips, etc. |                    |   |  |
| OH   | 52-6125679                      | 48061.44                   |                    |   |  |
| 17 State income tax  | 18 Local wages, tips, etc.      |                            |                    |   |  |
| 1448.28  |                                 |                            |                    |   |  |
| 19 Local income tax  | 20 Locality name                |                            |                    |   |  |
| <b>W-2</b>   |                                 | Federal Filing Copy        |                    | <b>2020</b>   |  |
| Wage and Tax Statement   |                                 | OMB No. 1545-0008          |                    | Copy B to be filed with employee's Federal Income Tax Return. |  |

|  |                                |                            |                    |   |  |
|--|--------------------------------|----------------------------|--------------------|---|--|
| 1 Wages, tips, other comp.   | 2 Federal income tax withheld  |                            |                    |   |  |
| 64222.56   | 7810.87                        |                            |                    |   |  |
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| 5 Medicare wages and tips  | 6 Medicare tax withheld        |                            |                    |   |  |
| d Control number   | Dept.                          | Corp.                      | Employer use only  |   |  |
| 000515 ATLA/MMU  |                                |                            | A 3                |   |  |
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| MICRONET IT SOLUTIONS<br>INC<br>3057 PEACHTREE IND BLVD<br>DULUTH GA 30097 |                                |                            |                    |   |  |
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| 9  | 10 Dependent care benefits     |                            |                    |   |  |
| 11 Nonqualified plans  | 12a                            |                            |                    |   |  |
| 14 Other   | 12b                            |                            |                    |   |  |
|  | 12c                            |                            |                    |   |  |
|  | 12d                            |                            |                    |   |  |
|  | 13 Stat emp.                   | Ret. plan                  | 3rd party sick pay |   |  |
| e/f Employee's name, address and ZIP code                                  |                                |                            |                    |   |  |
| TANOOJ CHANDRA ADDAGUDU<br>3415 WEST HILLSBOROUGH AVENUE<br>TAMPA FL 33614 |                                |                            |                    |   |  |
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| 17 State income tax  | 18 Local wages, tips, etc.     |                            |                    |   |  |
| 1448.28  |                                |                            |                    |   |  |
| 19 Local income tax  | 20 Locality name               |                            |                    |   |  |
| <b>W-2</b>   |                                | OH.State Reference Copy    |                    | <b>2020</b>   |  |
| Wage and Tax Statement   |                                | OMB No. 1545-0008          |                    | Copy 2 to be filed with employee's State Income Tax Return. |  |

|  |                                |                            |                    |   |  |
|--|--------------------------------|----------------------------|--------------------|---|--|
| 1 Wages, tips, other comp.   | 2 Federal income tax withheld  |                            |                    |   |  |
| 64222.56   | 7810.87                        |                            |                    |   |  |
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| 14 Other   | 12b                            |                            |                    |   |  |
|  | 12c                            |                            |                    |   |  |
|  | 12d                            |                            |                    |   |  |
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| e/f Employee's name, address and ZIP code                                  |                                |                            |                    |   |  |
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| 15 State   | Employer's state ID no.        | 16 State wages, tips, etc. |                    |   |  |
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| 17 State income tax  | 18 Local wages, tips, etc.     |                            |                    |   |  |
| 1448.28  |                                |                            |                    |   |  |
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| <b>W-2</b>   |                                | OH.State Filing Copy       |                    | <b>2020</b>   |  |
| Wage and Tax Statement   |                                | OMB No. 1545-0008          |                    | Copy 2 to be filed with employee's State Income Tax Return. |  |