Copy B To Be Filed Wit FEDERAL Tax Return	th Employee's	2021 OMB No. 1545-0008			
a Employee's social	1 Wages, tips, other comp.	2 Federal income tax withheld			
security number	66432.63	4343.39			
205-35-4281	3 Social security wages	4 Social security tax withheld			
b Employer ID number	69113.14	4285.01			
68-0281955	5 Medicare wages and tips 69113.14 1002.14				
c Employer's name, address		1002.14			
		_			
	are North America	i Inc.			
39300 Civic (Center Drive				
Ste 270					
Fremont, CA	94538				
d Control Number					
ODSI 648	GOVINDASWAMI	RAMALIN			
e Employee's first name and	initial Last name				
RAMALINGAM G	GOVINDASWAMI				
116 Preston V	•••				
Sandy Springs f Employee's address, and					
7 Social security tips	8 Allocated tips	9			
10 Dependent care benefits	12a Code See inst. for box 12				
		D 2680.51			
13 Statutory employee 14	Other	12b Code			
		L 20.00			
Retirement plan		12c Code			
X Third-party sick pay		12d Code			
i niro-party sick pay		12d Code			
GA 2194596-0	CX 66432.63	2802.05			
	00132.03	2002.03			
15 State Emplr.'s state I.D. #	16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
Form W-2 Wage and Tax Stat	tement	Dept. of the Treasury - IRS			

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This information is being furnished to the	e Internal Revenue Service			

Copy C For EMPLOYE (See Notice to Employ				_ 20	4 I	1545-000	
a Employee's social	1 Wages, tips, other comp.			2 Federal income tax withheld			
security number	66432.63			4343.39			
	3 Social security wages 69113.14			4 Social security tax withheld 4285.01			
b Employer ID number 68-0281955	5 Medicare wages and tips			4∠85.0⊥ 6 Medicare tax withheld			
00-0201933	69113.14			1002.14			
c Employer's name, address	s, and ZIP			1		_ _	
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39300 Civic							
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Fremont, CA	91539	2					
d Control Number	74000)					
ODSI 648		GOVINDASWAMI	RAMZ	ALIN			
e Employee's first name and	d initial	Last name					
RAMALINGAM G	GC	DVINDASWAMI					
116 Preston							
IIO IIESCON	woods	s Trail					
Sandy Spring		-					
Sandy Spring f Employee's address, and	S, GA ZIP code	A 30338					
Sandy Spring	S, GA ZIP code	-	9)			
Sandy Spring fEmployee's address, and 7 Social security tips	S, GA ZIP code 8 A	A 30338 Allocated tips			See ins	st. for box 12	
Sandy Spring fEmployee's address, and 7 Social security tips	S, GA ZIP code 8 A	A 30338	12	2a Code		st. for box 12	
Sandy Spring fEmployee's address, and 7 Social security tips 10 Dependent care benefits	S, GA ZIP code 8 A	A 30338 Allocated tips	12	2a Code			
Sandy Spring fEmployee's address, and 7 Social security tips 10 Dependent care benefits	S, GA ZIP code 8 A 11 N	A 30338 Allocated tips	12	2 a Code D	268		
Sandy Spring f Employee's address, and 7 Social security tips 10 Dependent care benefits	S, GA ZIP code 8 A 11 N	A 30338 Allocated tips	12	2a Code D 2b Code	268	0.51	
Sandy Spring <u>f Employee's address, and</u> 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan X	S, GA ZIP code 8 A 11 M	A 30338 Allocated tips	12 12 12	2a Code D 2b Code L 2c Code	268	0.51	
Sandy Spring <u>f Employee's address, and</u> 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan	S, GA ZIP code 8 A 11 M	A 30338 Allocated tips	12 12 12	2a Code D 2b Code L	268	0.51	
Sandy Spring f Employee's address, and 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan X Third-party sick pay	S, GZ ZIP code 87 11 N 4 Other	A 30338 Nilocated tips	12 12 12 12 12	2a Code D 2b Code L 2c Code	268	0.51	
Sandy Spring <u>f Employee's address, and</u> 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan X	S, GZ ZIP code 87 11 N 4 Other	A 30338 Allocated tips	12 12 12 12 12	2a Code D 2b Code L 2c Code	268	0.51	
Sandy Spring f Employee's address, and 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan X Third-party sick pay GA 2194596- 15 State Emplr's state I.D.#	S, GZ ZIP code 8 / 11 N 4 Other	A 30338 Nilocated tips	12 12 12 12 12	2a Code D 2b Code L 2c Code 2d Code	268 2 28 28	0.51 0.00 302.05	
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Copy 2 To Be Filed Wi City, or Local Income		2021	OMB No. 1545-0008			
a Employee's social security number	1 Wages	s, tips, other comp.	2 Federal income tax withheld			
		66432.63	4343.39			
205-35-4281				Social security tax withheld		
b Employer ID number		69113.14 4285.01				
68-0281955	5 Medicare wages and tips 69113.14 1002.					
c Employer's name, addres	e and ZIP		1002.14			
			-			
		North America	Inc	•		
39300 Civic	Cente	er Drive				
Ste 270						
Fremont, CA	94538					
d Control Number						
ODSI 648 GOVINDASWAMI RAMALIN						
e Employee's first name an	d initial	Last name				
RAMALINGAM G	GC	VINDASWAMI				
116 Preston						
Sandy Spring						
	•	1 20220				
f Employee's address, and ZIP code 7 Social security tips 8 Allocated tips						
			-			
10 Dependent care benefits	11 N	lonqualified plans	12a C	ode See ins	t. for box 12	
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13 Statutory employee 1	4 Other		12b C			
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Third-party sick pay			12d C	ode		
GA 2194596-	CV	66432.63		20	02.05	
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15 State Emplr.'s state I.D. # 16 State wages, tips, etc. 17 State income tax					ax	
18 Local wages, tips, etc.		ocal income tax		cality name		

Extra Employee Cop	У		2	2021	OMB No. 1545-000{		
a Employee's social security number	1 Wages	s, tips, other comp.	2 Federal income tax withheld				
205-35-4281		66432.63	4343.39				
	3 Social	security wages 69113.14	4 Social security tax withheld 4285.01				
b Employer ID number 68-0281955	E Madia	69113.14 are wages and tips	4∠85.0⊥ 6 Medicare tax withheld				
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c Employer's name, addre					L 4		
		North America	Tnc				
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Fremont, CA	94538	3					
d Control Number							
ODSI 648	RAMALI	N					
e Employee's first name a	nd initial	Last name					
RAMALINGAM (G GC	VINDASWAMI					
116 Preston	Woods	s Trail					
Sandy Spring	gs, GA	30338					
f Employee's address, an							
7 Social security tips	8 /	Allocated tips	9				
10 Dependent care benefits 11 Nongualified plans 12a			12a C	ode See ins	t. for box 12		
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13 Statutory employee	14 Other		12b C				
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X Third party sick pay	12d Code						
Third-party sick pay			120 0	Jue			
GA 2194596-	-CX	66432.63		28	02.05		
15 State Emplr.'s state I.D	#	16 State wages, tips, etc.	17 9	State income	tav		
18 Local wages, tips, etc.		ocal income tax		cality name	<u></u>		
Form W-2 Wage and Tax Statement				Dept. of the Treasury - IR			