a Employe 815-97	a Employee's social security number 815-97-9538		OMB No. 1545-0008 Safe, accurate, FAST! Use Visit the IRS website at www.irs.gov/efile			
b Employer identification number (EIN) 81-2075358			1 Wag	es, tips, other compensation 6687.50	2 Federal income tax withheld 370.00	
fETDIONE'S name, address, and ZIP code 1460 E WHITESTONE BLVD SUITE 270			3 Soc	ial security wages 6687.50	4 Social security tax withheld 414.63	
			5 Medicare wages and tips 6687.50		6 Medicare tax withheld 96.97	
CEDAR PARK	TX 78613		7 Soc	ial security tips	8 Allocated tips	
d Control number			9		10 Dependent care benefits	
e Employee's name, address, and ZIP code SANILKUMAR MABAGAPU			11 Nor	nqualified plans	12a See instructions for box 12	
2900 W HIGHLAND ST APT 371			13 Statu	tory Retirement Third-party oyee plan sick pay	12b	
CHANDLER	AZ 85224				o d e	
			14 Other		12c	
					12d	
15 State Employer's state ID number AZ 812075358	16 State wages, tips, etc. 6687.50	17 State incom	ne tax 1.06	18 Local wages, tips, etc.	19 Local income tax 20 Locality name	

Form W-2 Wage and Tax Statement



Department of the Treasury-Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.