# 2021 W-2 and EARNINGS SUMMARY

**Employee Reference Copy**
**W-2** Wage and Tax Statement **2021**
OMB No. 1545-0008
Copy C for employee's records.

| d Control number | Dept. | Corp. | Employer use only |
|---|---|---|---|
| 000012 KU/B4T | | | A |

c Employer's name, address, and ZIP code
KIRANAM TECHNOLOGIES INC
196 SOUTHWESTERN BLVD
COPPELL, TX 75019 4500

Batch #92056

e/f Employee's name, address, and ZIP code
DAYANAND MAMIDYALA
6301 CEDAR SAGE TRAIL
ARGYLE, TX 76226

| | |
|---|---|
| b Employer's FED ID number 45-5037664 | a Employee's SSA number XXX-XX-5354 |
| 1 Wages, tips, other comp. 86691.12 | 2 Federal income tax withheld 8827.94 |
| 3 Social security wages 86691.12 | 4 Social security tax withheld 5374.85 |
| 5 Medicare wages and tips 86691.12 | 6 Medicare tax withheld 1257.02 |
| 7 Social security tips | 8 Allocated tips |
| 9 | 10 Dependent care benefits |
| 11 Nonqualified plans | 12a See instructions for box 12 DD 800.00 |
| 14 Other 155.48 SDI | 12b W 800.00 |
| | 12c |
| | 12d |
| | 13 Stat emp / Ret. plan / 3rd party sick pay |
| 15 State CA Employer's state ID no. 037-7356 1 | 16 State wages, tips, etc. 12957.08 |
| 17 State income tax 275.36 | 18 Local wages, tips, etc. |
| 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 Box 1 of W-2 | Social Security Wages Box 3 of W-2 | Medicare Wages Box 5 of W-2 | CA. State Wages, Tips, Etc. Box 16 of W-2 |
|---|---|---|---|---|
| Gross Pay | 101,732.00 | 101,732.00 | 101,732.00 | 15,360.00 |
| Less Other Cafe 125 | 14,240.88 | 14,240.88 | 14,240.88 | 2,402.92 |
| Less Cafe125 HSA (W-Box 12) | 800.00 | 800.00 | 800.00 | N/A |
| **Reported W-2 Wages** | **86,691.12** | **86,691.12** | **86,691.12** | **12,957.08** |

2. Employee Name and Address.

DAYANAND MAMIDYALA
6301 CEDAR SAGE TRAIL
ARGYLE, TX 76226




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| 14 Other 155.48 SDI | 12b W 800.00 |
| | 12c |
| | 12d |
| | 13 Stat emp / Ret. plan / 3rd party sick pay |
| e/f Employee's name, address and ZIP code DAYANAND MAMIDYALA 6301 CEDAR SAGE TRAIL ARGYLE, TX 76226 | |
| 15 State CA Employer's state ID no. 037-7356 1 | 16 State wages, tips, etc. 12957.08 |
| 17 State income tax 275.36 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name |


**Federal Filing Copy**
**W-2** Wage and Tax Statement **2021**
OMB No. 1545-0008
Copy B to be filed with employee's Federal Income Tax Return.


| | |
|---|---|
| 1 Wages, tips, other comp. 86691.12 | 2 Federal income tax withheld 8827.94 |
| 3 Social security wages 86691.12 | 4 Social security tax withheld 5374.85 |
| 5 Medicare wages and tips 86691.12 | 6 Medicare tax withheld 1257.02 |
| d Control number 000012 KU/B4T | Dept. / Corp. / Employer use only A |
| c Employer's name, address, and ZIP code KIRANAM TECHNOLOGIES INC 196 SOUTHWESTERN BLVD COPPELL, TX 75019 4500 | |
| b Employer's FED ID number 45-5037664 | a Employee's SSA number XXX-XX-5354 |
| 7 Social security tips | 8 Allocated tips |
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| 11 Nonqualified plans | 12a DD 800.00 |
| 14 Other 155.48 CA SDI | 12b W 800.00 |
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| | 12d |
| | 13 Stat emp / Ret. plan / 3rd party sick pay |
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| 15 State CA Employer's state ID no. 037-7356 1 | 16 State wages, tips, etc. 12957.08 |
| 17 State income tax 275.36 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name |


**CA.State Reference Copy**
**W-2** Wage and Tax Statement **2021**
OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return.


| | |
|---|---|
| 1 Wages, tips, other comp. 86691.12 | 2 Federal income tax withheld 8827.94 |
| 3 Social security wages 86691.12 | 4 Social security tax withheld 5374.85 |
| 5 Medicare wages and tips 86691.12 | 6 Medicare tax withheld 1257.02 |
| d Control number 000012 KU/B4T | Dept. / Corp. / Employer use only A |
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| e/f Employee's name, address and ZIP code DAYANAND MAMIDYALA 6301 CEDAR SAGE TRAIL ARGYLE, TX 76226 | |
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| 17 State income tax 275.36 | 18 Local wages, tips, etc. |
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**CA.State Filing Copy**
**W-2** Wage and Tax Statement **2021**
OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return.

☐ CORRECTED (if checked)

**Mortgage Interest Statement**

OMB No. 1545-1380

**2021**

Form **1098**

| | |
|---|---|
| RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.<br>Movement Mortgage, LLC<br>PO BOX 100081<br>Duluth, GA 30096-9377<br>855-979-1084 | *Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person. |
| | 1 Mortgage interest received from payer(s)/borrower(s)* $ 9,709.67 |
| PAYER'S/BORROWER'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code<br>7-834-05076-0056505-012-3-000-000-000-000<br>DAYANAND MAMIDYALA<br>6301 CEDAR SAGE TRL<br>ARGYLE TX 76226-7808 | 2 Outstanding mortgage principal $ 426,800.00 |
| | 3 Mortgage origination date 03/08/2021 |
| | 4 Refund of overpaid interest $ 0.00 |
| | 5 Mortgage insurance premiums $ 2,592.81 |
| | 6 Points paid on purchase of principal residence $ 0.00 |
| | 7 If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8. ☒ |
| | 8 Address or description of property securing mortgage |
| | 9 Number of properties securing the mortgage 1 |
| | 10 Other Taxes Paid YTD 8,288.81 |
| | 11 Mortgage acquisition date 03/12/2021 |
| | Account number (see instructions) 3010092441 |
| | RECIPIENT'S/LENDER'S TIN 26-0595342 |
| | PAYER'S/BORROWER'S TIN ***-**-5354 |

**Copy B For Payer/ Borrower**

The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6, or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.

Form **1098** (keep for your records) www.irs.gov/Form1098 Department of the Treasury - Internal Revenue Service

## Instructions for Payer/Borrower

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or business and, in the course of such trade or business, received from you at least $600 of mortgage interest (including certain points) on any one mortgage in the calendar year must furnish this statement to you.

If you received this statement as the payer of record on a mortgage on which there are other borrowers, furnish each of the other borrowers with information about the proper distribution of amounts reported on this form. Each borrower is entitled to deduct only the amount he or she paid and points paid by the seller that represent his or her share of the amount allowable as a deduction. Each borrower may have to include in income a share of any amount reported in box 4.

If your mortgage payments were subsidized by a government agency, you may not be able to deduct the amount of the subsidy. See the instructions for Schedule A, C, or E (Form 1040) for how to report the mortgage interest. Also, for more information, see Pub. 936 and Pub. 535.

**Payer's/Borrower's taxpayer identification number (TIN).** For your protection, this form may show only the last four digits of your TIN (SSN, ITIN, ATIN, or EIN). However, the issuer has reported your complete TIN to the IRS.

**Account number.** May show an account or other unique number the lender has assigned to distinguish your account.

**Box 1.** Shows the mortgage interest received by the recipient/lender during the year. This amount includes interest on any obligation secured by real property, including a mortgage, home equity loan, or line of credit. This amount does not include points, government subsidy payments, or seller payments on a "buydown" mortgage. Such amounts are deductible by you only in certain circumstances.

CAUTION *If you prepaid interest in 2021 that accrued in full by January 15, 2022, this prepaid interest may be included in box 1. However, you cannot deduct the prepaid amount in 2021 even though it may be included in box 1.*

If you hold a mortgage credit certificate and can claim the mortgage interest credit, see Form 8396. If the interest was paid on a mortgage, home equity loan, or line of credit secured by a qualified residence, you can only deduct the interest paid on acquisition indebtedness, and you may be subject to a deduction limitation.

**Box 2.** Shows the outstanding principal on the mortgage as of January 1, 2021. If the mortgage originated in 2021, shows the mortgage principal as of the date of origination. If the recipient/lender acquired the loan in 2021, shows the mortgage principal as of the date of acquisition.

**Box 3.** Shows the date of the mortgage origination.

**Box 4. Do not deduct this amount.** It is a refund (or credit) for overpayment(s) of interest you made in a prior year or years. If you itemized deductions in the year(s) you paid the interest, you may have to include part or all of the box 4 amount on the "Other income" line of your 2021 Schedule 1 (Form 1040). No adjustment to your prior year(s) tax return(s) is necessary. For more information, see Pub. 936 and *Itemized Deduction Recoveries* in Pub. 525.

**Box 5.** If an amount is reported in this box, it may qualify to be treated as deductible mortgage interest. See the 2021 Schedule A (Form 1040) instructions and Pub. 936.

**Box 6.** Not all points are reportable to you. Box 6 shows points you or the seller paid this year for the purchase of your principal residence that are required to be reported to you. Generally, these points are fully deductible in the year paid, but you must subtract seller-paid points from the basis of your residence. Other points not reported in box 6 may also be deductible. See Pub. 936 to figure the amount you can deduct.

**Box 7.** If the address of the property securing the mortgage is the same as the payer's/borrower's, either the box has been checked, or box 8 has been completed.

**Box 8.** Shows the address or description of the property securing the mortgage.

**Box 9.** If more than one property secures the loan, shows the number of properties securing the mortgage. If only one property secures the loan, this box may be blank.

**Box 10.** The interest recipient may use this box to give you other information, such as real estate taxes or insurance paid from escrow.

**Box 11.** If the recipient/lender acquired the mortgage in 2021, shows the date of acquisition.

**Future developments.** For the latest information about developments related to Form 1098 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/Form1098*.

**FreeFile.** Go to *www.irs.gov/FreeFile* to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

## A voucher is printed at the bottom of this page.

**NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-V for the year 2020. This is different than the voucher that is on the IRS website.**

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) on your check or money order.

Mail payment to:

INTERNAL REVENUE SERVICE
PO BOX 802501
CINCINNATI OH 45280-2501



20 1040VS1 BWF 1040

Form **1040-V** (2020)

▼ **Detach Here and Mail with Your Payment and Return** ▼

Department of the Treasury
**Internal Revenue Service**

**2020**
OMB No. 1545-0074

**Form 1040-V Payment Voucher**

- ▶ Use Form 1040-V when paying the balance due on Form 1040, Form 1040A, 1040EZ, or 1040NR.
- ▶ Enter your SSN on your check or money order
- ▶ If your name, address, or SSN is incorrect, see instructions.

| Amount you are paying by check or money order. Make your check or money order payable to "United States Treasury" | Dollars |
|---|---|
| | 1,324 |

2029

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

DAYANAND AND SRAVANTHI MAMIDYALA
617 ILLINOIS CT APT 14
EL SEGUNDO CA 90245

INTERNAL REVENUE SERVICE
PO BOX 802501
CINCINNATI OH 45280-2501

857015354 KZ MAMI 30 0 202012 610

# Voucher at bottom of page.

**DO NOT MAIL A PAPER COPY OF YOUR TAX RETURN WITH THE PAYMENT VOUCHER.**
**If amount of payment is zero, do not mail this voucher.**

**WHERE TO FILE:** Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write the taxpayer's social security number (SSN) or individual taxpayer identification number (ITIN) and "2020 FTB 3582" on the check or money order. Detach the voucher below. Enclose, but **do not** staple, payment with the voucher and mail to:

**FRANCHISE TAX BOARD**
**PO BOX 942867**
**SACRAMENTO CA 94267-0008**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

**WHEN TO FILE:** **Calendar Year - File and pay by April 15, 2021.**

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

**ONLINE SERVICES:** Use Web Pay and enjoy the ease of our free online payment service. Go to **ftb.ca.gov/pay** for more information. **Do not mail this voucher if you use Web Pay.**

DETACH HERE ____ IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER ____ DETACH HERE

**CAUTION:** You may be required to pay electronically. See instructions.

TAXABLE YEAR **2020**

## Payment Voucher for Individual e-filed Returns

CALIFORNIA FORM **3582 (e-file)**

857-01-5354 MAMI 975-95-2291 20
DAYANAND MAMIDYALA
SRAVANTHI MAMIDYALA

617 ILLINOIS CT APT 14
EL SEGUNDO CA 90245

Amount of payment 304.