									Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5		
To the right is an explanation of the contents of the wage boxes on your W-2. Please note that the Gross amount shown may include adjustments.								es te	143831.	.36 143831.	36 143831.36		
			,				Txbl Benefit						
							Group Term	LITE					
							Adoption						
							Deferred Co		(19114.6	50)			
							Section 125	i	(2479.6	56) (2479.6	6) (2479.66)		
							Other Preta	x/Wage Limit					
							W-2 Wages		122237	.10 141351.	70 141351.70		
D. CONTROL	LNUMBER	This Information is being furnished				1545 0000	1. WAGES, TI	PS, OTHER COMPENS	ATION	2. FEDERAL INCOME TAX WITHHELD			
00004303	031301 to the Internal Revenue Service 2021 OMB NO. 1545-0008				1545-0008	122237.10			12165.03				
		TION NUMBER	A. EMPLOYEE'S	SOCIAL SEC	URITY NUMBE	ER	3. SOCIAL SE	XX WITHHELD					
52-171477	74		721-75-8960					14135	1.70		8763.81		
C. EMPLOYE	R'S NAME, AI	DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT			
	vables Serv	ices, Inc.						14135	1.70		2049.60		
PO Box 50 San Diego	4080 CA 92150-	4080					7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS			
							9.			10. DEPENDENT CARE E	BENEFITS		
	E'S FIRST NAN	IE AND INITIAL	LAST NA			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d D	19114.60		
Sandeep			Danda	mudi						DD	1479.66		
241 Durants Neck Ln Morrisville NC 27560 USA						14. OTHER CA	SDI	1539.58					
F. EMPLOYEE'S ADDRESS AND ZIP CODE										13. STATUTORY RETIRE	EMENT X THIRD PARTY SICK PAY		
15. STATE CA		STATE I.D. NO.	16. STATE WAG	ES, TIPS, ET		STATE INCOME T	AX 4891.29	18. LOCAL WAGES,	TIPS, ETC. 19). LOCAL INCOME TAX	20. LOCALITY NAME		
		<u> </u>											

D. CONTRO	L NUMBER	This Information is	being furnished			10 4545 0000	1. WAGES, TI	PS, OTHER C	OMPENSATIO	N	2.FE	2. FEDERAL INCOME TAX WITHHELD			
00004303	31301	to the Internal Rev	enue Service	2021	OMB	NO. 154	545-0008			122237.1)			12165.03	
B. EMPLOYER IDENTIFICATION NUMBER			A. EMPLOYEE'S SOCIAL SECURITY NUMBER				3. SOCIAL SECURITY WAGES				4. SC	4. SOCIAL SECURITY TAX WITHHELD			
52-17147	74		721-75-8960					141351.70					8763.81		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE									5. MEDICARE WAGES AND TIPS				6. MEDICARE TAX WITHHELD		
EDF Renev	wables Serv	rices, Inc.						141351.70				2049.60			
PO Box 504080 San Diego CA 92150-4080								7. SOCIAL SEC	URITY TIPS			8. AL	LOCATED TIPS		
								9.				10. DI	EPENDENT CARE	BENEFITS	
E. EMPLOYE	E. EMPLOYEE'S FIRST NAME AND INITIAL			AME			SUFF.	11. NONQUAL	FIED PLANS			12.a-c	d D	19114.60	
Sandeep			Danda	mudi								DD	1479.66		
241 Durants Neck Ln Morrisville NC 27560 USA							14. OTHER CA	SDI		1539.5	8				
												TATUTORY RET	REMENT X THIRD PARTY SICK PAY		
	F. EMPLOYEE'S ADDRESS AND ZIP CODE						***	40		ero					
15. STATE		S STATE I.D. NO.	16. STATE WAG			17. STATE	INCOME T		18. LOCAL	WAGES, TIPS	EIC.	19. LOCA	L INCOME TAX	20. LOCALITY NAME	
CA	389-6969	9-/		122237	/.10			4891.29							

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2021

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBE 000043031301	R This Information is to the Internal Rev	n is being furnished Revenue Service 2021		OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 122237.10			2. FEDERAL INCOME TAX WITHHELD 12165.03			
B. EMPLOYER IDENTI	FICATION NUMBER	A. EMPLOYEE'S	SOCIAL SECU	IRITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
52-1714774		721-75-8960			141351.70				8763.81		
C. EMPLOYER'S NAM	E, ADDRESS, AND ZIP (ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	6. MEDICARE TAX WITHHELD		
EDF Renewables	Services, Inc.					14135	51.70		2049.60		
PO Box 504080 San Diego CA 92150-4080					7. SOCIAL SEC	7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
					9.			10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST	NAME AND INITIAL	LAST NA	AME	SUFF.	11. NONQUALIFIED PLANS			12.a-d D	19114.60		
Sandeep		Dandamudi						DD	1479.66		
241 Durants Nec Morrisville NC 27 USA				14. OTHER CA	SDI	1539.5	8				
F. EMPLOYEE'S ADD	RESS AND ZIP CODE							13. STATUTORY RET	REMENT X THIRD PARTY N SICK PAY		
	YER'S STATE I.D. NO. 969-7	16. STATE WAG	ES, TIPS, ET 122237.		AX 4891.29	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		

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2021

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 000043031301	Tina iniormation is	nformation is being furnished e Internal Revenue Service		OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 122237.10			2. FEDERAL INCOME TAX WITHHELD 12165.03			
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER						CURITY WAGES		4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
52-1714774		721-75-8960				14135	1.70		8763.81		
C. EMPLOYER'S NAME	, ADDRESS, AND ZIP (ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD		
EDF Renewables S	ervices, Inc.					14135	1.70		2049.60		
PO Box 504080 San Diego CA 92150-4080						CURITY TIPS		8. ALLOCATED TIPS	8. ALLOCATED TIPS		
					9.			10. DEPENDENT CARE BENEFITS			
E. EMPLOYEE'S FIRST	NAME AND INITIAL	LAST NA	ME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d D	19114.60		
Sandeep	Sandeep Dandamudi							DD	1479.66		
241 Durants Neck Ln Morrisville NC 27560 USA					14. OTHER CA SDI 1539.58						
F. EMPLOYEE'S ADDR	ESS AND ZIP CODE							13. STATUTORY RETI	REMENT X THIRD PARTY SICK PAY		
15. STATE EMPLOY CA 389-69	ER'S STATE I.D. NO. 969-7	16. STATE WAGE	S, TIPS, ETC. 122237.1		AX 4891.29	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		