2021 W-2 and EARNINGS SUMMARY



Employee Reference
Wage and Tax
Statement
Copy C for employee's records.

Copy 2021

OMB No. 1545-0008

Employer use only

057628 SANF/IFL 001 c Employer's name, address, and ZIP code

d Control number

XORIANT CORPORATION 1248 REAMWOOD AVE SUNNYVALE CA 94089

Corp.

Batch #02242

e/f Employee's name, address, and ZIP code SRINIDHI REDDY BARLA 39201 RED HAWK TERRACE

APT A102

FREMONT CA 94538 b Employer's FED ID number a Employee's SSA number 77-0250875 XXX-XX-9042 Wages, tips, other comp. Federal income tax withheld 12207.69 1981.55 Social security wages 4 Social security tax withheld 12207.69 756.88 5 Medicare wages and tips 6 Medicare tax withheld 12207.69 177.01 Social security tips 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 11 Nonqualified plans 12b 14 Other 146 49 SDI 13 Stat emp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. CA 378-0589 2 12207.69 17 State income tax 18 Local wages, tips, etc. 850.22 19 Local income tax 20 Locality name

1	1 Wages, tips, other comp.		2	2 Federal income tax withheld		
12207.69						1981.55
3	Social security wage	es 07.69	4	Social	security tax	withheld 756.88
5	5 Medicare wages and tips 12207.69		6	6 Medicare tax withheld 177.01		
d	Control number	Dept.		Corp.	Employer	use only
05	7628 SANF/IFL	001			A	80

c Employer's name, address, and ZIP code
XORIANT CORPORATION
1248 REAMWOOD AVE
SUNNYVALE CA 94089

b	Employer's FED ID number 77-0250875	a Employee's SSA number XXX-XX-9042
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12
14	Other	12b
	146.49 SDI	12c
		12d
		13 Stat emp Ret. plan 3rd party sick pay
e/f	Employee's name, address an	d ZIP code

SRINIDHI REDDY BARLA 39201 RED HAWK TERRACE APT A102

FREMONT CA 94538

Federal Filing Copy
Wage and Tax
Statement
Copy B to be filed with employee's Federal Income Tax Return.

Federal Filing Copy
Statement

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	Social Security	Medicare	CA. State Wages,	
	Compensation	Wages	Wages	Tips, Etc.	
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2	
Gross Pay Reported W-2 Wages	12,207.69	12,207.69	12,207.69	12,207.69	
	12,207.69	12,207.69	12,207.69	12,207.69	

2. Employee Name and Address.

SRINIDHI REDDY BARLA 39201 RED HAWK TERRACE APT A102 FREMONT CA 94538

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		2 Federal income tax withheld				
12207.	1981.55					
3 Social security wages 12207.69		4 Social security tax withheld 756.88				
Medicare wages and tips 12207.	6 Medicare tax withheld 177.01					
d Control number D	ept.	Corp.	Employ	er use only		
057628 SANF/IFL	001		A	80		
c Employer's name, address, and ZIP code XORIANT CORPORATION						
1248 REAMWOOD AVE SUNNYVALE CA 94089						
Employer's FED ID numl	ber	a Emplo	yee's SS/			
77 - 02 5 0 8 7 5 7 Social security tips		8 Alloca	XXX-XX ted tips	-3042		
3	00000000	10 Danas	d4	h 614 -		
,		io Depen	dent care	benefits		
11 Nonqualified plans	1	I2a				
14 Other	1	12b				
146.49 CA SDI	1	12c				
		12d				
	1	I3 Stat em	p. Ret. plan	3rd party sick pay		
e/f Employee's name, addre	ss and	ZIP cod	le			
SRINIDHI REDDY BARLA 39201 RED HAWK TERRACE APT A102 FREMONT CA 94538						
APT A102			≣			
APT A102 FREMONT CA 945	38	RRACI		os, etc. 12207.69		
APT A102 FREMONT CA 945 5 State Employer's state I CA 378-0589 2	5 38 ID no.	RRACI		12207.69		
APT A102 FREMONT CA 945 15 State Employer's state CA 378-0589 2 17 State income tax 850	5 38 ID no.	RRACI	wages, tip	12207.69		
APT A102 FREMONT CA 945 15 State Employer's state CA 378-0589 2 17 State income tax 850	538 ID no.	RRACI 16 State 18 Local 20 Locali	wages, tip wages, tip ty name	12207.69 ps, etc.		

Statement

Copy 2 to be filed with employee's State Income Tax Retur

1	Wages, tips, other comp.			Federal income tax withheld		
	12207.69				1	.981.55
3	Social security wages 12207.69			Social security tax withheld 756.88		
5	Medicare wages and tips 12207.69			Medicare tax withheld 177.01		
d	Control number	Dept.		Corp.	Employer	use only
05	7628 SANF/IFL	001			A	80
c Employer's name, address, and ZIP code						

XORIANT CORPORATION 1248 REAMWOOD AVE SUNNYVALE CA 94089

b	Employer's FED ID number	a Employee's SSA number				
	77-0250875	XXX-XX-9042				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a				
14	Other	12b				
	146.49 CA SDI	12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pa				

e/f Employee's name, address and ZIP code

SRINIDHI REDDY BARLA 39201 RED HAWK TERRACE APT A102 FREMONT CA 94538

15 State	Employer's state ID no.	16	State wages, tips, etc.
CA	378-0589 2		12207.69
17 State	income tax	18	Local wages, tips, etc.
	850.22		
19 Local	income tax	20	Locality name

CA.State Filling Copy

Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax Return.

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