

| | | | | | | |
|--|----------------------------|---|---|---|----------------------------|-------------------------|
| a Employee's SSN 176-21-8453 | | b Employer identification number (EIN) 20-1449012 | | | OMB No. 1545-0008 | |
| c Employer's name, address, and ZIP code RITE PROS INC 565 CONGRESS STREET, SUITE # 305 PORTLAND ME 04101 | | 1 Wgs, tips, other compn 111275.00 | 2 Fed inc tax withheld 16220.00 | 3 Social security wages 132500.00 | | |
| | | 4 SS tax withheld 8215.00 | 5 Medicare wages & tips 132500.00 | 6 Medicare tax withheld 1921.25 | | |
| | | 7 Social security tips | 8 Allocated tips | 9 | | |
| d Control number | | 10 Depdnt care benefits | 11 Nonqualified plans | 12a D 21225.00 | | |
| e Employee's name, address, and ZIP code Suff. TEJESH REDDY SINGASANI 513 MORROWS TURNOUT WAY PINEVILLE NC 28134 | | 13 Statutory employee. <input type="checkbox"/> | 14 Other | 12b | | |
| | | Retirement plan . . <input checked="" type="checkbox"/> | | 12c | | |
| | | Third-party sick pay <input type="checkbox"/> | | 12d | | |
| 15 State | Employer's state ID number | 16 State wages, tips, etc | 17 State income tax | 18 Local wages, tips, etc | 19 Local income tax | 20 Locality name |
| IL | 20-1449012 000 | 55175.00 | 2731.16 | | | |
| NC | 601221670 | 56100.00 | 2412.00 | | | |

Form **W-2**
Wage and Tax Statement
2023

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

| | | | | | | |
|--|-------------------------|---|---|---|----------------------------|-------------------------|
| a Employee's SSN 176-21-8453 | | b Employer identification number (EIN) 20-1449012 | | | OMB No. 1545-0008 | |
| c Employer's name, address, and ZIP code RITE PROS INC 565 CONGRESS STREET, SUITE # 305 PORTLAND ME 04101 | | 1 Wgs, tips, other compn 111275.00 | 2 Fed inc tax withheld 16220.00 | 3 Social security wages 132500.00 | | |
| | | 4 SS tax withheld 8215.00 | 5 Medicare wages & tips 132500.00 | 6 Medicare tax withheld 1921.25 | | |
| | | 7 Social security tips | 8 Allocated tips | 9 | | |
| d Control number | | 10 Depdnt care benefits | 11 Nonqualified plans | 12a D 21225.00 | | |
| e Employee's name, address, and ZIP code Suff. TEJESH REDDY SINGASANI 513 MORROWS TURNOUT WAY PINEVILLE NC 28134 | | 13 Statutory employee. <input type="checkbox"/> | 14 Other | 12b | | |
| | | Retirement plan . . <input checked="" type="checkbox"/> | | 12c | | |
| | | Third-party sick pay <input type="checkbox"/> | | 12d | | |
| 15 State | Employer's state ID No. | 16 State wages, tips, etc | 17 State income tax | 18 Local wages, tips, etc | 19 Local income tax | 20 Locality name |
| IL | 20-1449012 000 | 55175.00 | 2731.16 | | | |
| NC | 601221670 | 56100.00 | 2412.00 | | | |

Form **W-2**
Wage and Tax Statement
2023

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

| | | | | | | |
|--|-------------------------|---|---|---|----------------------------|-------------------------|
| a Employee's SSN 176-21-8453 | | b Employer identification number (EIN) 20-1449012 | | | OMB No. 1545-0008 | |
| c Employer's name, address, and ZIP code RITE PROS INC 565 CONGRESS STREET, SUITE # 305 PORTLAND ME 04101 | | This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it. | | | | |
| | | 1 Wgs, tips, other compn 111275.00 | 2 Fed inc tax withheld 16220.00 | 3 Social security wages 132500.00 | | |
| | | 4 SS tax withheld 8215.00 | 5 Medicare wages & tips 132500.00 | 6 Medicare tax withheld 1921.25 | | |
| d Control No. | | 7 Social security tips | 8 Allocated tips | 9 | | |
| | | 10 Depdnt care benefits | 11 Nonqualified plans | 12a D 21225.00 | | |
| | | 13 Statutory employee. <input type="checkbox"/> | 14 Other | 12b | | |
| Retirement plan . . <input checked="" type="checkbox"/> | 12c | | | | | |
| Third-party sick pay <input type="checkbox"/> | 12d | | | | | |
| 15 State | Employer's state ID No. | 16 State wages, tips, etc | 17 State income tax | 18 Local wages, tips, etc | 19 Local income tax | 20 Locality name |
| IL | 20-1449012 000 | 55175.00 | 2731.16 | | | |
| NC | 601221670 | 56100.00 | 2412.00 | | | |

Form **W-2**
Wage and Tax Statement
2023

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee.)