Dept. of the Treasury • Internal Revenue Service FORM W-2 Wage and Tax Statement This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may the imposed on you if this income is taxable and you fail to report it. Copy C For EMPLOYEE'S RECORDS (See notice on back of Copy 2)

These substitute W-2 Wage and Tax Statements are acceptable for filing with your Federal, State and Local Income Tax Returns. If you worked in multiple locations, or had several forms of special compensation, you may receive more than one of these documents.

Medicare Soc. Sec. Federal Box 5 Box 3 and 7 Box 1 78230.69 78230.69 78230.69 Gross Wages The white copies of the W-2 forms are for your tax returns; the blue copy is for your records. Txbl Benefits 23.75 General instructions, including an explanation 23.75 23.75 Group Term Life of the letter codes in box 12, are on the other Adoption side of the page. (15646.04)Deferred Comp Section 125 To the right is an explanation of your W-2 wages. Please note that the Gross amount Other Pretax/Wage Limit may include adjustments. 78254.44 78254.44 62608.40 W-2 Wages 2. FEDERAL INCOME TAX WITHHELD 1. WAGES, TIPS, OTHER, COMPENSATION This information is being furnished to the D. CONTROL NUMBER OMB NO. 1545 - 0008 2018 62608.40 000469273501 Internal Revenue Service 4. SOCIAL SECURITY TAX WITHHELD 3. SOCIAL SECURITY WAGES A. EMPLOYEE'S SOCIAL SECURITY NUMBER B. EMPLOYER IDENTIFICATION NUMBER 78254.44

793-28-0504

62608.40

| C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Probys 2400 Meadowbrook Pkwy Duluth GA 30096 13. Statutory Retirement Third-Party Sick Pay | | | | | | 5. MEDIC | 5. MEDICARE WAGES AND TIPS 7825 | | 1134.69 | | | |
|--|---|-------------|------------------------|------|----------------------|--|---|--------------|--|-----------------------------|---------------------------|--|
| | | | | | | у | 7. SOCIAL SECURITY TIPS | | | 8. ALLOCATED TIPS | | |
| Linployee | | | | | | 9. VERIFICATION CODE 33ec-51ec-c82f-78f7 | | | 10. DEPENDENT CARE BENEFITS | | | |
| Umadevi 22228 Vi #311 woodlan USA | woodland Hills CA 91367 USA | | | | | | 11. NONQUALIFIED PLANS 14. OTHER CA SDI 751.54 | | | CD | 23.75 | |
| F. EMPLOYEE'S 15. STATE CA | ## SADDRESS AND ZIP CODE EMPLOYER'S STATE I.D. NO. 428-9627-4 16. STATE WAGES, TIPS, ETC. 62608.40 17. STATE INCOME TAX 7 | | | | | 747.75 | 18. LOCAL WAGES, TIPS, ETC. | | CALINCOME TAX 20. LOCALITY NAME ID TEAR ALONG PERFORATION | | | |
| | D. CONTROL NUMBER 000469273501 This information is being furnished to the Internal Revenue Service OMB NO. 1545 - 0008 | | | | | | TIPS, OTHER, COMPENSATION | 62608.40 | 2. FEDERAL INCOME TAX WITHHELD 3361.21 | | | |
| | B. EMPLOYER IDENTIFICATION NUMBER 36-3984423 A. EMPLOYEE'S SOCIAL SECURITY NUMBER 793-28-0504 | | | | | | SECURITY WAGES | 78254.44 | 4. SOCIAL SECURITY TAX WITHHELD 4851.78 | | | |
| C. EMPLOYER | C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Probys | | | | | | 5. MEDICARE WAGES AND TIPS 78254.44 | | 6. MEDICARE TAX WITHHELD 1134.69 | | | |
| 2400 Meadowbrook Pkwy Duluth GA 30096 | | | | | | 7. SOCIAL | 7. SOCIAL SECURITY TIPS | | | 8. ALLOCATED TIPS | | |
| | | | | | | | 9. VERIFICATION CODE | | | 10. DEPENDENT CARE BENEFITS | | |
| Umadev 22228 \ #311 woodlar | woodland Hills CA 91367 | | | | | | DI | 751.54 | 12. a-d | CD | 23.75 | |
| F. EMPLOYEE'S | S ADDRESS AND ZIP C | ODE | | | | | | | 13. Statutory Employee | Retirement | X Third-Party Sick Pay | |
| 15. STATE | EMPLOYER'S STAT | TE I.D. NO. | 16. STATE WAGES, TIPS, | ETC. | 17. STATE INCOME TAX | 747 75 | 18. LOCAL WAGES, TIPS, ETC | 19. LOCAL II | NCOME TAX | 20. LOCALITY | NAME | |

5. MEDICARE WAGES AND TIPS

Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return FORM W-2 Wage and Tax Statement

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6. MEDICARE TAX WITHHELD

D. CONTROL NUMBER 1. WAGES, TIPS, OTHER, COMPENSATION 2. FEDERAL INCOME TAX WITHHELD This information is being furnished to the OMB NO. 1545 - 0008 000469273501 62608.40 3361.21 Internal Revenue Service A. EMPLOYEE'S SOCIAL SECURITY NUMBER B. EMPLOYER IDENTIFICATION NUMBER 3. SOCIAL SECURITY WAGES 4. SOCIAL SECURITY TAX WITHHELD 793-28-0504 36-3984423 78254.44 4851.78 5. MEDICARE WAGES AND TIPS C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE 6. MEDICARE TAX WITHHELD Probys 78254.44 1134.69 2400 Meadowbrook Pkwy 7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS Duluth GA 30096 9. VERIFICATION CODE 10. DEPENDENT CARE BENEFITS E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF 11. NONQUALIFIED PLANS 12. a-d Sunkireddy Umadevi 23.75 ·C 22228 Victory blvd 14. OTHER 15646.04 #311 CA SDI 751.54 woodland Hills CA 91367 USA 13. Statutory Third-Party Sick Pay Retirement F. EMPLOYEE'S ADDRESS AND ZIP CODE Employee 15. STATE EMPLOYER'S STATE I.D. NO. 16. STATE WAGES, TIPS, ETC. 17. STATE INCOME TAX 18. LOCAL WAGES, TIPS, ETC. 19. LOCAL INCOME TAX 20. LOCALITY NAME CA 428-9627-4 62608.40 747.75

Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return FORM W-2 Wage and Tax Statement

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