This information is being funished to the	bloyee's FEDERAL Tax Return e Internal Revenue Service.	OMB No. 1545-0008	Copy 2To Be Filed V or Local Income Tax
a. Employee's social security number		2. Federal income tax withheld	a. Employee's social securi
275437466	88131.82 3. Social security wages	14596.63 4. Social security tax withheld	275437466
o. Employer ID number (EIN)	6600.00	409.20	b. Employer ID number
47-2941419	5. Medicare wages and tips 6600.00	6. Medicare tax withheld 95.70	47-2941419
c. Employer's name, address, a	nd ZIP code	-1	c. Employer's name, ad
SKL SOLUTIONS INC			SKL SOLUTIONS
101 E. PARK BLVD SUI PLANO, TX 75074	TE 210		101 E. PARK BL PLANO, TX 7507
d. Control number			d. Control number
e. Employee's name, address, a	ind ZIP code		e. Employee's name, a
DINESH MALIREDDY			DINESH MALIREI
5521 North Militar	ry Trail Apt 1106		5521 North Mi
BOCA RATON, FL 334	196		BOCA RATON, FI
7. Social security tips	8. Allocated tips	9. Verification Code	7. Social security tips
10. Dependent care benefits	11. Nonqualified plans	12a. Code See inst. for Box 12	10. Dependent care be
13. Statutory employee	14. Other	12b. Code	13. Statutory employee
Retirement plan		12c. Code	Retirement plan
Third-party sick pay		12d. Code	Third-party sick pa
NC 601215801	257	581.00	NC 601215
15. State Employer's state ID	number 16. State wages, t	tips, etc. 17.State income tax	15. State Employer's
Copy CFor EMPLOYEE'S RECORD	S(See Notice to Employee.) Il Revenue Service. If you are required to file a tax ay be imposed on you if this income is taxable and you	OMB No. 1545-0008	Copy 2To Be Filed V
return, a negligence penalty or other sanction m ail to report it. a. Employee's social security number	ay be imposed on you if this income is taxable and you 1. Wages, tips, other compensation	2. Federal income tax withheld	or Local Income Tax
275437466	88131.82	14596.63	275437466
	3. Social security wages 6600.00	4. Social security tax withheld 409.20	
b. Employer ID number (EIN) 47-2941419	5. Medicare wages and tips	6. Medicare tax withheld	b. Employer ID number 47-2941419
- Englande anna address a	6600.00	95.70	
c. Employer's name, address, an SKL SOLUTIONS INC	na ZIP coae		c. Employer's name, ac SKL SOLUTIONS
101 E. PARK BLVD SUI PLANO, TX 75074	101 E. PARK BL PLANO, TX 7507		
d. Control number			d. Control number
 Employee's name, address, a DINESH MALIREDDY 	ind ∠IP code		e. Employee's name, a DINESH MALIRE
5521 North Militar	5521 North Mi		
BOCA RATON, FL 334			BOCA RATON, F
7. Social security tips	8. Allocated tips	9. Verification Code	7. Social security tips
10. Dependent care benefits	11. Nonqualified plans	12a. Code See inst. for Box 12	10. Dependent care be
12 Statutory amployee	14. Other	12b. Code	12 Statistans ampless
13. Statutory employee	14. Other		13. Statutory employee
Retirement plan		12c. Code	Retirement plan
Third-party sick pay		12d. Code	Third-party sick pa
NC 601215801	2573	7.25 581.00	NC 601215
15. State Employer's state ID	number 16. State wages, t	tips, 17.State income tax	15. State Employer's
18. Local wages, tips, etc.	19. Local income tax 20. Locailty	name	18. Local wages, tips, e
Form W-2 Wage and Tax State		rtment of the Treasury ~ Internal Revenue Service	Form W-2 Wages

Copy 2To Be Filed With Employee's State, City, or Local Income Tax Return				OMB No. 1545-0008				
a. Employee	s social security number	1. Wages, tips,	other com	pensation	2. Federal income tax withheld			
275437466			8813	1.82		14596.63		
		3. Social sec	3. Social security wages 4.		4. So	4. Social security tax withheld		
o. Employ	er ID number (EIN)	6600.00		409.20				
47-2941419		5. Medicare wages and tips		6. Medicare tax withheld				
		6600.00			95.70			
c. Employ	er's name, address, an	d ZIP code						
SKL SO	SKL SOLUTIONS INC							
101 E.	PARK BLVD SUI	TE 210						
PLANO, TX 75074								
d. Control number								
 Employ 	ee's name, address, ar	nd ZIP code						
DINES	H MALIREDDY							
5521 I	North Military	Trail Apt	1106					
BOCA I	RATON, FL 33496	5						
					٥	Verification Code		
7. Social security tips		8. Allocated tips						
10. Dependent care benefits		11. Nonqualified plans			12	12a, Code See inst, for Box 12		
					12a. Code See Inst. IOI BOX 12			
13. Statutory employee		4. Other			12	12b. Code		
io. Glaiull		14. Uther			12	IZD. CODE		
Detingenet aller						12c. Code		
Kei	tirement plan				12	120. CODE		
Third-party sick pay					40			
					12	12d. Code		
	601015001			0.0.0.0.0	1	F01 00		
NC	601215801	25737.		.25	581.00			
15. State	Employer's state ID	number 16. State wages, tips, e		s, etc.	17.State income tax			
18. Local wages, tips, etc. 19. Local income tax 20. Locality name								
Form W-2 Wage and Tax Statement 2019 Department of the Treasury ~ Internal Revenue Service								

Copy 2To Be Filed With Emp or Local Income Tax Return		OMB No. 1545-0008							
a. Employee's social security number				2. Federal income tax withheld					
275437466	88131.82		14596.63						
	Social secu	.00 é600		4. Social sececutity tax withheld 409.20					
b. Employer ID number (EIN)	E Madiagra ::								
47-2941419	5. Medicare w	6600.00	o. we	95.70					
c. Employer's name, address, ar	nd ZIP code								
SKL SOLUTIONS INC									
101 E. PARK BLVD SUI PLANO, TX 75074	101 E. PARK BLVD SUITE 210								
LING, 77 'OUNT									
d. Control number									
e. Employee's name, address, and ZIP code									
DINESH MALIREDDY									
5521 North Military Trail Apt 1106									
BOCA RATON, FL 33496									
7. Social security tips 8. Allocated		ps		9. Verification Code					
10. Dependent care benefits	11. Nonqualified	onqualified plans		12a. Code See inst. for Box 12					
13. Statutory employee	14. Other		12	12b. Code					
				.15. 0000					
Retirement plan				12c. Code					
Third-party sick pay				12d. Code					
NC 601215801	25737.			581.00					
15. State Employer's state ID number		16. State wages, tips,		17.State income tax					
18. Local wages, tips, etc. 19. Local income tax 20. Locailty name									
Form W-2 Wage and Tax Statement 2019 Department of the Treasury ~ Internal Revenue Service									