

a Employee's SSN 213-83-9658		1 Wages, tips, other compensation 72160.00		2 Federal income tax withheld 7468.81	
OMB No. 1545-0008		3 Social security wages 72160.00		4 Social security tax withheld 4473.92	
b Employer identification number 46-4312603		5 Medicare wages and tips 72160.00		6 Medicare tax withheld 1046.32	
c Employer's name, address, and ZIP code NOUS TECHNOLOGIES INC 700 WILLINGHAM RD  MORRISVILLE NC 27560					
e Employee's first name and initial LAKSHMI		Last name UMMANENI		Suff.	
403 BOSCAWEN LN  CARY NC 27519					
f Employee's address and ZIP code					
d Control number		7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits		11 Nonqualified plans	
12a		14 Other			
12b					
12c					
12d					
13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		Third-party sick pay <input type="checkbox"/>	
15 State Employer's state ID number NC   600872519		16 State wages, tips, etc. 72160.00		17 State income tax 3504.00	
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 B - To Be Filed With Employee's FEDERAL Tax Return.

a Employee's SSN 213-83-9658		1 Wages, tips, other compensation 72160.00		2 Federal income tax withheld 7468.81	
OMB No. 1545-0008		3 Social security wages 72160.00		4 Social security tax withheld 4473.92	
b Employer identification number 46-4312603		5 Medicare wages and tips 72160.00		6 Medicare tax withheld 1046.32	
c Employer's name, address, and ZIP code NOUS TECHNOLOGIES INC 700 WILLINGHAM RD  MORRISVILLE NC 27560					
d Control number		7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits		11 Nonqualified plans	
12a		14 Other			
12b					
12c					
12d					
13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		Third-party sick pay <input type="checkbox"/>	
15 State Employer's state ID number NC   600872519		16 State wages, tips, etc. 72160.00		17 State income tax 3504.00	
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 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

a Employee's SSN 213-83-9658		1 Wages, tips, other compensation 72160.00		2 Federal income tax withheld 7468.81	
OMB No. 1545-0008		3 Social security wages 72160.00		4 Social security tax withheld 4473.92	
b Employer identification number 46-4312603		5 Medicare wages and tips 72160.00		6 Medicare tax withheld 1046.32	
c Employer's name, address, and ZIP code NOUS TECHNOLOGIES INC 700 WILLINGHAM RD  MORRISVILLE NC 27560					
e Employee's first name and initial LAKSHMI		Last name UMMANENI		Suff.	
403 BOSCAWEN LN  CARY NC 27519					
f Employee's address and ZIP code					
d Control number		7 Social security tips		8 Allocated tips	
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12a		14 Other			
12b					
12c					
12d					
13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		Third-party sick pay <input type="checkbox"/>	
15 State Employer's state ID number NC   600872519		16 State wages, tips, etc. 72160.00		17 State income tax 3504.00	
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** Wage and Tax Statement **2019** Copy C - For EMPLOYEE'S RECORDS.

a Employee's SSN 213-83-9658		1 Wages, tips, other compensation 72160.00		2 Federal income tax withheld 7468.81	
OMB No. 1545-0008		3 Social security wages 72160.00		4 Social security tax withheld 4473.92	
b Employer identification number 46-4312603		5 Medicare wages and tips 72160.00		6 Medicare tax withheld 1046.32	
c Employer's name, address, and ZIP code NOUS TECHNOLOGIES INC 700 WILLINGHAM RD  MORRISVILLE NC 27560					
e Employee's first name and initial LAKSHMI		Last name UMMANENI		Suff.	
403 BOSCAWEN LN  CARY NC 27519					
f Employee's address and ZIP code					
d Control number		7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits		11 Nonqualified plans	
12a		14 Other			
12b					
12c					
12d					
13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		Third-party sick pay <input type="checkbox"/>	
15 State Employer's state ID number NC   600872519		16 State wages, tips, etc. 72160.00		17 State income tax 3504.00	
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 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

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 be imposed on you if this income is taxable and you fail to report it.

1 Wages, tips, other compensation		2 Federal Income tax withheld	
25267.44		2091.51	
3 Social security wages		4 Social security tax withheld	
26958.35		1671.42	
5 Medicare wages and tips		6 Medicare tax withheld	
26958.35		390.90	
a Employee's SSA number		Employer use only	
213-83-9658			
b Employer's FED ID number		d Control number	
77-0674256		02242602	
c Employer's name, address, and ZIP code			
State of North Carolina Beacon Payroll 1425 Mail Service Center Raleigh NC 27699-1425			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
		900.00	
11 Nonqualified plans		12a See instructions for box 12	
		DD 2393.56	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C 27.00
14 Other		12c	
		12d	
e Employee's first name and initial		Last name	
Lakshmi K Ummaneni		Lakshmi K Ummaneni	
403 Boscawen Lane		403 Boscawen Lane	
Cary NC 27519		Cary NC 27519	
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
NC	600655680	25267.44	
16 State wages, tips, etc.		19 Local income tax	
25267.44		1084.00	
17 State income tax		20 Locality name	
1084.00			
Form OMB No. 1545-0008 <b>W-2 Wage and Tax Statement 2019</b> Dept. of the Treasury - Internal Revenue Service. 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.			
Copy C for Employee's records			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
25267.44		2091.51	
3 Social security wages		4 Social security tax withheld	
26958.35		1671.42	
5 Medicare wages and tips		6 Medicare tax withheld	
26958.35		390.90	
a Employee's SSA number		Employer use only	
213-83-9658			
b Employer's FED ID number		d Control number	
77-0674256		02242602	
c Employer's name, address, and ZIP code			
State of North Carolina Beacon Payroll 1425 Mail Service Center Raleigh NC 27699-1425			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
		900.00	
11 Nonqualified plans		12a See instructions for box 12	
		DD 2393.56	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C 27.00
14 Other		12c	
		12d	
e Employee's first name and initial		Last name	
Lakshmi K Ummaneni		Lakshmi K Ummaneni	
403 Boscawen Lane		403 Boscawen Lane	
Cary NC 27519		Cary NC 27519	
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
NC	600655680	25267.44	
16 State wages, tips, etc.		19 Local income tax	
25267.44		1084.00	
17 State income tax		20 Locality name	
1084.00			
Form OMB No. 1545-0008 <b>W-2 Wage and Tax Statement 2019</b> Dept. of the Treasury - Internal Revenue Service			
Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
25267.44		2091.51	
3 Social security wages		4 Social security tax withheld	
26958.35		1671.42	
5 Medicare wages and tips		6 Medicare tax withheld	
26958.35		390.90	
a Employee's SSA number		Employer use only	
213-83-9658			
b Employer's FED ID number		d Control number	
77-0674256		02242602	
c Employer's name, address, and ZIP code			
State of North Carolina Beacon Payroll 1425 Mail Service Center Raleigh NC 27699-1425			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
		900.00	
11 Nonqualified plans		12a See instructions for box 12	
		DD 2393.56	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C 27.00
14 Other		12c	
		12d	
e Employee's first name and initial		Last name	
Lakshmi K Ummaneni		Lakshmi K Ummaneni	
403 Boscawen Lane		403 Boscawen Lane	
Cary NC 27519		Cary NC 27519	
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
NC	600655680	25267.44	
16 State wages, tips, etc.		19 Local income tax	
25267.44		1084.00	
17 State income tax		20 Locality name	
1084.00			
Form OMB No. 1545-0008 <b>W-2 Wage and Tax Statement 2019</b> Dept. of the Treasury - Internal Revenue Service			
Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
25267.44		2091.51	
3 Social security wages		4 Social security tax withheld	
26958.35		1671.42	
5 Medicare wages and tips		6 Medicare tax withheld	
26958.35		390.90	
a Employee's SSA number		Employer use only	
213-83-9658			
b Employer's FED ID number		d Control number	
77-0674256		02242602	
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State of North Carolina Beacon Payroll 1425 Mail Service Center Raleigh NC 27699-1425			
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<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C 27.00
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Lakshmi K Ummaneni		Lakshmi K Ummaneni	
403 Boscawen Lane		403 Boscawen Lane	
Cary NC 27519		Cary NC 27519	
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16 State wages, tips, etc.		19 Local income tax	
25267.44		1084.00	
17 State income tax		20 Locality name	
1084.00			
Form OMB No. 1545-0008 <b>W-2 Wage and Tax Statement 2019</b> Dept. of the Treasury - Internal Revenue Service			
Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			

# 2019 W-2 and EARNINGS SUMMARY



Employee Reference Copy <b>W-2</b> Wage and Tax Statement <b>2019</b>		Copy 2019 OMB No. 1545-0008	
d Control number 798474 CLI2/DGZ		Dept.	Corp.
c Employer's name, address, and ZIP code <b>DB GLOBAL TECHNOLOGY INC 60 WALL STREET 19FLOOR NEW YORK NY 10005</b>		Employer use only <b>A</b>	
Batch #02353			
e/f Employee's name, address, and ZIP code <b>KRISHNA CHAITANYA POLAVARAPU 403 BOSCAWEN LANE CARY NC 27519</b>			
b Employer's FED ID number <b>27-0509518</b>	a Employee's SSA number <b>380-33-6568</b>		
1 Wages, tips, other comp. <b>92106.12</b>	2 Federal income tax withheld <b>6476.86</b>		
3 Social security wages <b>96051.27</b>	4 Social security tax withheld <b>5955.18</b>		
5 Medicare wages and tips <b>96051.27</b>	6 Medicare tax withheld <b>1392.74</b>		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 <b>C   190.32</b>		
14 Other	12b <b>D   3945.15</b>		
	12c <b>W   3000.00</b>		
	12d <b>DD   22109.04</b>		
	13 Stat emp Ret. plan 3rd party sick pay <b>X</b>		
15 State Employer's state ID no. <b>NC 600740414</b>	16 State wages, tips, etc. <b>92106.12</b>		
17 State income tax <b>4383.00</b>	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. 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 Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NC. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	101,602.47	101,602.47	101,602.47	101,602.47
Plus GTL (C-Box 12)	190.32	190.32	190.32	190.32
Less 401(k) (D-Box 12)	3,945.15	N/A	N/A	3,945.15
Less Other Cafe 125	2,741.52	2,741.52	2,741.52	2,741.52
Less Cafe 125 HSA (W-Box 12)	3,000.00	3,000.00	3,000.00	3,000.00
<b>Reported W-2 Wages</b>	<b>92,106.12</b>	<b>96,051.27</b>	<b>96,051.27</b>	<b>92,106.12</b>

Note - Fringe benefits include : Employer Paid LTD \$143.52

**2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.**

**KRISHNA CHAITANYA POLAVARAPU  
403 BOSCAWEN LANE  
CARY NC 27519**

Social Security Number: **380-33-6568**  
Taxable Marital Status: **MARRIED**  
Exemptions/Allowances:  
**FEDERAL: 6**  
**STATE: Married, 0**

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1 Wages, tips, other comp. <b>92106.12</b>	2 Federal income tax withheld <b>6476.86</b>		
3 Social security wages <b>96051.27</b>	4 Social security tax withheld <b>5955.18</b>		
5 Medicare wages and tips <b>96051.27</b>	6 Medicare tax withheld <b>1392.74</b>		
d Control number 798474 CLI2/DGZ	Dept.	Corp.	Employer use only <b>A</b>
c Employer's name, address, and ZIP code <b>DB GLOBAL TECHNOLOGY INC 60 WALL STREET 19FLOOR NEW YORK NY 10005</b>			
b Employer's FED ID number <b>27-0509518</b>	a Employee's SSA number <b>380-33-6568</b>		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 <b>C   190.32</b>		
14 Other	12b <b>D   3945.15</b>		
	12c <b>W   3000.00</b>		
	12d <b>DD   22109.04</b>		
	13 Stat emp Ret. plan 3rd party sick pay <b>X</b>		
e/f Employee's name, address and ZIP code <b>KRISHNA CHAITANYA POLAVARAPU 403 BOSCAWEN LANE CARY NC 27519</b>			
15 State Employer's state ID no. <b>NC 600740414</b>	16 State wages, tips, etc. <b>92106.12</b>		
17 State income tax <b>4383.00</b>	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

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e/f Employee's name, address and ZIP code <b>KRISHNA CHAITANYA POLAVARAPU 403 BOSCAWEN LANE CARY NC 27519</b>			
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17 State income tax <b>4383.00</b>	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

Federal Filing Copy <b>W-2</b> Wage and Tax Statement <b>2019</b>		Copy 2019 OMB No. 1545-0008	
Copy B to be filed with employee's Federal Income Tax Return.			

NC.State Reference Copy <b>W-2</b> Wage and Tax Statement <b>2019</b>		Copy 2019 OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return.			

NC.State Filing Copy <b>W-2</b> Wage and Tax Statement <b>2019</b>		Copy 2019 OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return.			