<b>a</b> Employee's SSN 882-44-3002	b Employer identification n	umber (EIN) 83-218	35245	OMB No. 1545-0008
<b>c</b> Employer's name, address, and ZIP code ANALYTICS9 SOLUTIONS INC	1 Wgs, tips, other compn 48354.00	2 Fed inc tax withheld 7764.00	3 Social security wages	Form <b>W-2</b>
AI9 SOLUTIONS INC	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
10306 EATON PLACE SUITE 300-A11	7 Social security tips	8 Allocated tips	9	Tax
FAIRFAX VA 22030	Social security tips	<b>o</b> Allocated tips	3	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2020
				2020
<b>e</b> Employee's name, address, and ZIP code Suff.		14 Other	12b	
YUGENDHAR BORRA	Statutory employee		12c	Copy B To Be Filed with
3473 WOODALE DRIVE	Retirement plan			Tax Return
MONROE LA 71203			12d	furnished to the Internal
	Third-party sick pay			Revenue Service.
	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
$\begin{bmatrix} -11 \\ -12 \\ -1$	1639.19			
e Employee's name, address, and ZIP code   Suff.     YUGENDHAR   BORRA     3473   WOODALE   DRIVE     MONROE   LA   71203     15   State   Employer's state ID number   16   State wages, tips, etc     IL   83-2185245   000   9360.00	13     Statutory employee.     Retirement plan .     Third-party sick pay     17     State income tax     463.32	14 Other	12b 12c 12d	Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service.

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Department of the Treasury — IRS

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c Employer's name, address, and ZIP code   1 Wgs, tips, other compn   2 Fed inc tax withheld   3 Social security wages     ANALYTICS9 SOLUTIONS INC   48354.00   7764.00   The form W     AI9 SOLUTIONS INC   4 constraints   5 Mathematical form withheld   5 Mathematical form withheld   6 Mathematical form withheld	V-2
AI9 SOLUTIONS INC 4 SS tax withheld 5 Medicare wages & tips 6 Medicare tax withheld Wage	and
SUITE 300-A11 7 Social security tips 8 Allocated tips 9   FAIRFAX VA 22030 Statem	x
d Control number 10 Depdnt care benefits 11 Nonqualified plans 12a 202	20
e Employee's name, address, and ZIP code Suff. 13 14 Other 12b	
YUGENDHAR BORRA   3473 WOODALE   DRIVE Retirement plan	's State,
MONROE LA 71203	
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 r       IL     83-2185245     000     9360.00     463.32     -	' name — — — — -

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<b>a</b> Employee's SSN 882-44-3002	<b>b</b> Employer identification number (EIN) 83-2185245			OMB No. 1545-0008
C Employer's name, address, and ZIP code	This information is being furn other sanction may be impos	gligence penalty or		
ANALYTICS9 SOLUTIONS INC	1 Wgs, tips, other compn	2 Fed inc tax withheld	3 Social security wages	144.0
AI9 SOLUTIONS INC	48354.00	7764.00	· · · · · · · · · · · · · · · · · · ·	Form <b>W-2</b>
10306 EATON PLACE	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Waga and
SUITE 300-A11		Ū I		Wage and
FAIRFAX VA 22030	7 Social security tips	8 Allocated tips	9	Тах
d Control No.				Statement
	10 Depdnt care benefits	11 Nonqualified plans	12a	
				2020
e Employee's name, address, and ZIP code Suff.	13	14 Other	12b	
	Statutory employee -			
YUGENDHAR BORRA			12c	Copy C For EMPLOYEE'S
3473 WOODALE DRIVE	Retirement plan			RECORDS.
MONROE LA 71203			12d	(See Notice to
	Third-party sick pay			Employee.)
	7 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
IL_ <u>83-2185245_000</u> 9360.00	463.32			
LA 2481300-001 38994.00	1639.19			

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