

b Employer's Identification number 46-1092088		12a See instructions for Box 12		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code SV TECHNOLOGY SERVICES 15517 BRODICK DRIVE AUSTIN TX 78717		\$		85980.00		11905.08	
		12b		3 Social security wages		4 Social security tax withheld	
		\$		85980.00		5330.76	
		12c		5 Medicare wages and tips		6 Medicare tax withheld	
		\$		85980.00		1246.71	
		12d		7 Social security tips		8 Allocated tips	
		\$					
e Employee's first name and initial Last name 7661893		This information is being furnished to the Internal Revenue Service		9		10 Dependent care benefits	
PRASHANTH ANUGULA 2304 PARABLE WAY CARY NC 27519		Copy B To Be Filed with Employee's FEDERAL Tax Return		11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay	
				14 Other			
f Employee's address and ZIP code		a Employee's soc. sec. no. 269-61-7965					
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	
NC	601079918	85980.00	4025.00				

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

b Employer's Identification number 46-1092088		12a See instructions for Box 12		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code SV TECHNOLOGY SERVICES 15517 BRODICK DRIVE AUSTIN TX 78717		\$		85980.00		11905.08	
		12b		3 Social security wages		4 Social security tax withheld	
		\$		85980.00		5330.76	
		12c		5 Medicare wages and tips		6 Medicare tax withheld	
		\$		85980.00		1246.71	
		12d		7 Social security tips		8 Allocated tips	
		\$					
e Employee's first name and initial Last name 7661893		Copy 2 for State, City, or Local Tax Departments		9		10 Dependent care benefits	
PRASHANTH ANUGULA 2304 PARABLE WAY CARY NC 27519				11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay	
f Employee's address and ZIP code		a Employee's soc. sec. no. 269-61-7965					
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	
NC	601079918	85980.00	4025.00				

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

REV 01/21/22 OSP

b Employer's Identification number 46-1092088		12a See instructions for Box 12		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code SV TECHNOLOGY SERVICES 15517 BRODICK DRIVE AUSTIN TX 78717		\$		85980.00		11905.08	
		12b		3 Social security wages		4 Social security tax withheld	
		\$		85980.00		5330.76	
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		\$					
e Employee's first name and initial Last name 7661893		Copy 2 for State, City, or Local Tax Departments		9		10 Dependent care benefits	
PRASHANTH ANUGULA 2304 PARABLE WAY CARY NC 27519				11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay	
f Employee's address and ZIP code		a Employee's soc. sec. no. 269-61-7965					
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	
NC	601079918	85980.00	4025.00				

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

b Employer's Identification number 46-1092088		12a See instructions for Box 12		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code SV TECHNOLOGY SERVICES 15517 BRODICK DRIVE AUSTIN TX 78717		\$		85980.00		11905.08	
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		\$		85980.00		5330.76	
		12c		5 Medicare wages and tips		6 Medicare tax withheld	
		\$		85980.00		1246.71	
		12d		7 Social security tips		8 Allocated tips	
		\$					
e Employee's first name and initial Last name 7661893		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.		9		10 Dependent care benefits	
PRASHANTH ANUGULA 2304 PARABLE WAY CARY NC 27519				11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay	
f Employee's address and ZIP code		Copy C for Employee's Records (see notice to Employee on back.)					
		a Employee's soc. sec. no. 269-61-7965					
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	
NC	601079918	85980.00	4025.00				

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C For Employee's Records