Copy B To Be Filed W FEDERAL Tax Return		2021 OMB No. 1545-0008	Copy 2 To Be Filed W City, or Local Income		2021 OMB No. 1545-0008	
a. Employee's SSN	1 Wages, tips, other comp. 36336,00	2 Federal income tax withheld	a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld	
XXX-XX-9359	36336.00 3 Social security wages	5111.37 4 Social security tax withheld	XXX-XX-9359	36336.00 3 Social security wages	5111.37 4 Social security tax withheld	
b. Employer ID number		-	b. Employer ID number	1		
26-1206788	5 Medicare wages and tips	6 Medicare tax withheld	26-1206788	5 Medicare wages and tips	6 Medicare tax withheld	
c. Employer's name, addre	ess, and ZIP code		c. Employer's name, addres	s, and ZIP code		
CONFLUX SYST	EMS INC		CONFLUX SYSTE	MS INC		
	OODS CIRCLE, STE 30	2		ODS CIRCLE, STE 302		
ALPHARETTA,	GA 30005		ALPHARETTA, G	A 30005		
d. Control number 105			d. Control number 105			
e. Employee's name, addre	ess, and ZIP code		e. Employee's name, address	s, and ZIP code		
NAGA VENKATA	SAI V VINNAKOTA		NAGA VENKATA	SAI V VINNAKOTA		
	REEK DRIVE, UNIT A			EEK DRIVE, UNIT A		
CREVE COUER,	MO 63141		CREVE COUER,	MO 63141		
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips		
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee 1	4 Other	12b Code	13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	Retirement plan		12c Code	
Third party sick pay		12d Code	Third party sick pay		12d Code	
MO 23266295	36336	00 1603.00	MO 23266295	36336.	00 1603.00	
15 State Emplr.'s state I	D # 16 State wages, tips, etc	17 State income tax	15 State Emplr.'s state ID)# 16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips,etc.	19 Local income tax	20 Locality name	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
	- g furnished to the IRS. If you are requined to the IRS. If you are requined to you if this income is taxa	ble & you fail to report it.	AWW2-B22C	Copyright AccountantsWorld, 2004		
(See Notice to Emplo a. Employee's SSN	yee) 1 Wages, tips, other comp.	2021 OMB No. 1545-0008 2 Federal income tax withheld	City, or Local Income a. Employee's SSN		2021 OMB No. 1545-0008 2 Federal income tax withheld	
XXX-XX-9359	36336.00	5111.37	XXX-XX-9359	36336.00	5111.37	
b. Employer ID number	3 Social security wages	4 Social security tax with held	b. Employer ID number	3 Social security wages	4 Social security tax withheld	
	5 Medicare wages and tips	6 Medicare tax with held		5 Medicare wages and tips	6 Medicare tax with held	
26-1206788 c. Employer's name, addre	ess , and ZIP code		26-1206788 c. Employer's name, address	s , and ZIP code		
CONFLUX SYST	EMS INC		CONFLUX SYSTE	MS INC		
11539 PARK WOODS CIRCLE, STE 302				11539 PARK WOODS CIRCLE, STE 302		
ALPHARETTA,	GA 30005		ALPHARETTA, G	A 30005		
d. Control number 105			d. Control number 105			
e. Employee's name, addre	ess, and ZIP code		e. Employee's name, address	, and ZIP code		
NAGA VENKATA SAI V VINNAKOTA				NAGA VENKATA SAI V VINNAKOTA		
630 TURTLE C CREVE COUER,	REEK DRIVE, UNIT A		630 TURTLE CR CREVE COUER,	EEK DRIVE, UNIT A		
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips		
10 Dependent care benefi		12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee 1	4 Other	12b Code	13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	Retirement plan		12c Code	
Third party sick pay		12d Code	Third party sick pay		12d Code	
MO 23266295	36336	00 1603.00	MO 23266295	36336.	00 1603.00	
				1		
15 State Emplr.'s state			15 State EmpIr.'s state ID		17 State income tax	
15 State EmpIr.'s state I 18 Local wages, tips, etc.	ID # 16 State wages, tips, etc. 19 Local income tax	17 State income tax 20 Locality name	15 State Empir.'s state ID 18 Local wages, tips, et c.	16 State wages, tips, etc. 19 Local income tax	17 State income tax 20 Locality name	