

b Employer's Identification number		84-4349832		12a See instructions for Box 12		1 Wages, tips, other compensation		2 Federal income tax withheld			
c Employer's name, address, and ZIP code		IMAGEVISION.AI LLC		\$		27708.31		2330.44			
5055 KELLER SPRINGS ROAD, SUITE 160		ADDISON TX 75001		12b		3 Social security wages		4 Social security tax withheld			
				\$		27708.31		1717.92			
				12c		5 Medicare wages and tips		6 Medicare tax withheld			
				\$		27708.31		401.77			
				12d		7 Social security tips		8 Allocated tips			
				\$							
e Employee's first name and initial		Last name		This information is being furnished to the Internal Revenue Service Copy B To Be Filed with Employee's FEDERAL Tax Return		9		10 Dependent care benefits			
PARAMESWARA R GOSULA		14204617				11 Nonqualified plans		13 Statutory employee		Retirement plan	
16400 LEDGEMONT LN, APT 509		ADDISON TX 75001						<input type="checkbox"/>		<input type="checkbox"/>	
f Employee's address and ZIP code				a Employee's soc. sec. no		14 Other		Third-party sick pay			
15 State		Employer's state I.D. No.		800-26-5750				<input type="checkbox"/>			
16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name			
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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					

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e Employee's first name and initial		Last name		This information is being furnished to the Internal Revenue Service Copy 2 for State, City, or Local Tax Departments		9		10 Dependent care benefits			
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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					

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