46-5292387	12a See Instructions for Box 12	1 Wades, tips, other compensation	2 rederar income tax withheid
c Employer's name, address, and ZIP code	\$	65553.71	
HYPUR INC.	12b	3 Social security wages	4 Social security tax withheld
HIPOR INC.	\$		
	12c	5 Medicare wages and tips	6 Medicare tax withheld
7812 E. ACOMA DR.	\$		
SUITE 7	12d	7 Social security tips	8 Allocated tips
SCOTTSDALE AZ 85260	\$		
e Employee's first name and initial Last name		9	10 Dependent care benefits
5279228	This information is being furnished to the Internal Revenue Service		
		11 Nongualified plans	13 Statutory Retirement Third-party employee plan sick pay
SANJANA VADLAKONDA SUNILKUMAR	Carry D To Do Filed with		employee plan sick pay
12050 RESEARCH RD, 8203	Copy B To Be Filed with		
	Employee's FEDERAL	14 Other	
	Tax Return		
FRISCO TX 75033		-	
	a Employee's soc. sec. no	1	
f Employee's address and ZIP code	717-75-3575		
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
		F	
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	With Employee's FEDERAL Tax Return

b Employer's Identification number 46-5292387	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld		
c Employer's name, address, and ZIP code	:0 5252507		\$	65553.71	10581.45
HYPUR INC.			12b	3 Social security wages	4 Social security tax withheld
			ls l		
7812 E. ACOMA DR.			12c	5 Medicare wages and tips	6 Medicare tax withheld
			\$		
SUITE 7			12d	7 Social security tips	8 Allocated tips
SCOTTSDALE AZ 85260			IS		
e Employee's first name and initial Las	ist name			9	10 Dependent care benefits
	5279228				
			Conv 2 for State City or	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
SANJANA VADLAKONDA SU	JNILKUMAR		Copy 2 for State, City, or		employee plan sick pay
12050 RESEARCH RD, 82	203		Local Tax Departments	14 Other	
FRISCO TX 75033					
FRIBCO IN 75055			a Employee's soc. sec. no		
f Employee's address and ZIP code			717-75-3575		
15 State Employer's state I.D. No. 16 State	e wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
Form W-2 Wage and Tax Statement 2021 D	Pepartment of the Treasur	ry-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's ST	ATE, CITY, or LOCAL Tax Departments

REV 01/06/22 OSP

b Employer's Identification number a Employer's name, address, and ZIP code, 46 - 5292387	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code 40-5292367	\$	65553.71	10581.45
HYPUR INC.	12b	3 Social security wages	4 Social security tax withheld
mirok inc.	ls		
		5 Medicare wages and tips	6 Medicare tax withheld
7812 E. ACOMA DR.	\$		
SUITE 7	12d	7 Social security tips	8 Allocated tips
SCOTTSDALE AZ 85260	IS		
e Employee's first name and initial Last name		9	10 Dependent care benefits
5279228			
SANJANA VADLAKONDA SUNILKUMAR	Copy 2 for State, City, or	11 Nonqualified plans	13 Statutory Retirement Third-party plan sick pay
12050 RESEARCH RD, 8203	Local Tax Departments	14 Other	
FRISCO TX 75033	a Employee's soc. sec. no		
f Employee's address and ZIP code	717-75-3575		
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
+++++			
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 ST	ATE, CITY, or LOCAL Tax Departments

b Employer's Identification number 46-5292387	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	 \$	65553.71	10581.45
HYPUR INC.	12b	3 Social security wages	4 Social security tax withheld
mirok inc.	\$		
	12c	5 Medicare wages and tips	6 Medicare tax withheld
7812 E. ACOMA DR.	\$		
SUITE 7	12d	7 Social security tips	8 Allocated tips
SCOTTSDALE AZ 85260	\$		
e Employee's first name and initial Last name	This information is being furnished to the	9	10 Dependent care benefits
5279228	Internal Revenue Service. If you are required to file a tax return, a negligence		
SANJANA VADLAKONDA SUNILKUMAR		11 Nongualified plans	13 Statutory Retirement Third-party employee plan sick pay
12050 RESEARCH RD, 8203	Copy C for Employee's	14 Other	
FRISCO TX 75033	Records (see notice to Employee on back.)		
	a Employee's soc. sec. no		
f Employee's address and ZIP code	717-75-3575		
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
+		+	
	1	1	

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service

Copy C For Employee's Records