



W-2 Wage and Tax Statement
 Copy C for employee's records
 OMB No. 1545-0008
2021

d Control number: 000008 K7/5FX
 Dept.: K7/5FX
 Corp.:
 Employer use only: **A**

c Employer's name, address, and ZIP code
BRAVEN TECHNOLOGIES INC
 2770 MAIN ST STE 203
 FRISCO, TX 75033
 Batch #91520

e/f Employee's name, address, and ZIP code
UDAY KIRAN MANNE
 359 N WEST ST APT 486
 INDIANAPOLIS, IN 46202

b Employer's FED ID number: 45-0919609
a Employee's SSA number: XXX-XX-9150

1 Wages, tips, other comp. 102620.00	2 Federal income tax withheld 18741.95
3 Social security wages 102620.00	4 Social security tax withheld 6362.44
5 Medicare wages and tips 102620.00	6 Medicare tax withheld 1487.99
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14 Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State IN Employer's state ID no. 0169918815 001	16 State wages, tips, etc. 102620.00
17 State income tax 3314.66	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	IN. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	102,620.00	102,620.00	102,620.00	102,620.00
Reported W-2 Wages	102,620.00	102,620.00	102,620.00	102,620.00

2. Employee Name and Address.

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Federal Filing Copy
W-2 Wage and Tax Statement
 Copy B to be filed with employee's Federal Income Tax Return.
 OMB No. 1545-0008
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IN.State Reference Copy
W-2 Wage and Tax Statement
 Copy 2 to be filed with employee's State Income Tax Return.
 OMB No. 1545-0008
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