| Form W-2 Wage and Tax Statement 2021 | 7 Social | security tips | | 1 Wages, tips, other comp. 30430.80 | | 2 Federal income tax withheld 4408.41 | | |
|---|----------------------|---|-------------------------|--|------------------------|---|---|--|
| c Employer's name, address, and ZIP code DIGITAL INTELLIGENCE SYSTEMS 8270 GREENSBORO DRIVE SUITE 1000 MCLEAN VA 22102 | | ed tips | | 3 Social security wages 30430.80 | | 4 Social security tax withheld 1886.71 | | |
| | | | | 5 Medicare wages and tips 30430.80 | | 6 Medicare tax withheld 441.25 | | |
| | | ndent care benefits | 3 | 11 Nonqualified plans | | 12a See instructions for box 12 | | |
| e Employee's name, address, and ZIP code SRUJAN KUMAR MANIKONDA 809 E GREEN MEADOWS RD APT 207 COLUMBIA MO 65201-3754 | | ory Retirement yee plan | Third-party sick pay | 14 Other | | 12b | | |
| | | yer identification nu 636447 | umber (EIN) | | | | | |
| | | a Employee's social security no. 084-25-5732 | | | | 12d | | |
| 15 State Employer's state I.D. no. 16 State wages, tips, e MO 21863695 3043 | etc. 17 State | ncome tax 1358.0 | | l al wages, tips, etc. | 19 Local inc | ome tax | 20 Locality name | |
| Copy B To Be Filed With Employee's FEDERAL Tax Return | This inform | ation is being fumis | | Internal Revenue Service. IB No. 1545-0008 | | | ept. of the Treasury - IRS Web Site at www.irs.gov/efile | |
| | | | | This information is being fumishing negligence penalty or other sand | ed to the Internal Re- | venue Service. It d on you if this i | f you are required to file a tax return, a income is taxable and you fail to report it | |
| Form W-2 Wage and Tax Statement 2021 | 7 Social | security tips | | 1 Wages, tips, other cor 3 0 | np. 430.80 | 2 Federal | income tax withheld 4408.41 | |

| c Employer's name, address, and ZIP code | | A A H H H H | | | | | 4. On states and the terror dilate state | | | |
|--|--|---|----------------------------|----------------------|-------------------------------------|-----------------------|--|---------------------------------|-----------|------------------|
| DIGITAL INTELLIGENCE SYSTEMS | | 8 Allocated tips | | | 3 Social security wages 30430.80 | | 4 Social security tax withheld 1886.71 | | | |
| SULTE 1000 | | 9 | | | 5 Medicare wages and tips 30430.80 | | 6 Medicare tax withheld 441.25 | | | |
| | | 10 Dependent care benefits | | | | 11 Nongualified plans | | 12a See instructions for box 12 | | |
| MCLEAN VA 22102 | | | | | | 11 Honquainou piano | | Code | | |
| e Employee's name, address, and ZIP code | | 13 Statutory employee | Retirement plan | Third-pa sick pay | arty / | 14 Other | | 12b | | |
| SRUJAN KUMAR MANIKONDA 809 E GREEN MEADOWS RD APT 207 COLUMBIA MO 65201-3754 | | | | | | | | Cod e | | |
| | | b Employer identification number (EIN) 45-5636447 a Employee's social security no. 084-25-5732 | | | r (EIN) | | | 12c | | |
| | | | | | | | | 12d | | |
| | | | | | | | | | | |
| 15 State Employer's state I.D. no. MO 21863695 | 16 State wages, tips, etc. 30430.80 | 17 State incom | ^{ie tax} 1358. | | B Loca | al wages, tips, etc. | 19 Local inc | ome tax | | 20 Locality name |
| Copy C For EMPLOYEE'S RECORDS (See Notice | e to Employee on back of C | ору В) | | | OM | B No. 1545-0008 | | De | pt. of th | e Treasury - IRS |

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B)

OMB No. 1545-0008

| Form W-2 Wage and Tax Statement 2021 | 7 Social security tips | 1 Wages, tips, other comp. 30430.80 | 2 Federal income tax withheld 4408.41 | | |
|---|--|--|---|--|--|
| c Employer's name, address, and ZIP code DIGITAL INTELLIGENCE SYSTEMS | 8 Allocated tips | 3 Social security wages 30430.80 | 4 Social security tax withheld 1886.71 | | |
| 8270 GREENSBORO DRIVE SUITE 1000 | 9 | 5 Medicare wages and tips 30430.80 | 6 Medicare tax withheld 441.25 | | |
| MCLEAN VA 22102 | 10 Dependent care benefits | 11 Nonqualified plans | 12a | | |
| e Employee's name, address, and ZIP code | 13 Statutory Retirement Third-part plan sick pay | ^{iy} 14 Other | 12b | | |
| SRUJAN KUMAR MANIKONDA | b Employer identification number (| EIN) | a 12c g 12d g 12d | | |
| 809 E GREEN MEADOWS RD APT 207 | 45-5636447 | | | | |
| COLUMBIA MO 65201-3754 | a Employee's social security no. 084-25-5732 | | | | |
| 15 State Employer's state I.D. no. 16 State wages, tips, 304 | atc. 17 State income tax 18 30.80 1358.00 | Local wages, tips, etc. 19 Local inc | come tax 20 Locality name | | |
| Copy 2 To Be Filed With Employee's State, City, or Local Income T | ax Return | OMB No. 1545-0008 | Dept. of the Treasury - IRS | | |

| Form W-2 Wage and Tax Statement 2021 | | 7 Social security tips | | | | 2 Federal income tax withheld 4408.41 | | |
|--|---|---|----------------------------|----------------------------------|--------------------------------|--|--|--|
| c Employer's name, address, and ZIP code DIGITAL INTELLIGENCE SYST | EMS | 8 Allocated tips | 3 Social security wage | 3 Social security wages 30430.80 | | tax withheld 1886.71 | | |
| 8270 GREENSBORO DRIVE | | 9 | 5 Medicare wages and 3 | ^{tips} 0430.80 | 6 Medicare tax withheld 441.25 | | | |
| SUITE 1000 MCLEAN VA 22102 | | | 11 Nonqualified plans | | 12a | | | |
| e Employee's name, address, and ZIP code SRUJAN KUMAR MANIKONDA 809 E GREEN MEADOWS RD APT 207 COLUMBIA MO 65201-3754 | | 13 Statutory Retirement Third- plan sick p | ay 14 Other | | 12b | | | |
| | | b Employer identification numb 45-5636447 | er (EIN) | - | | 12c General Control C | | |
| | | a Employee's social security no 084-25-5732 |). | | | | | |
| | | | | | | | | |
| 15 State Employer's state I.D. no. MO 21863695 | 16 State wages, tips, etc. 30430.80 | 17 State income tax 1358.00 | 18 Local wages, tips, etc. | 19 Local inc | come tax | 20 Locality name | | |
| Copy 2 To Be Filed With Employee's State, City, o | or Local Income Tax Return | L87 | OMB No. 1545-0008 | 5206 | Dept. of | he Treasury - IRS | | |