

b Employer's identification number c Employer's name, address, and ZIP code		58-2365695		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
INFOSMART TECHNOLOGIES, INC.  5400 LAUREL SPRINGS PKWY STE 706 SUWANEE GA 30024-6084		313012207		\$	211227.57	48330.00
				12b	3 Social security wages	4 Social security tax withheld
				\$	142800.00	8853.60
				12c	5 Medicare wages and tips	6 Medicare tax withheld
e Employee's first name and initial Last name		313012207		\$	211227.57	3163.85
				12d	7 Social security tips	8 Allocated tips
f Employee's address and ZIP code		313012207		This information is being furnished to the Internal Revenue Service		9
				11 Nonqualified plans		10 Dependent care benefits
PAVAN KUMAR GOUD SOMAGANI 203 LOUDON RD UNIT # 117 CONCORD NH 03301		REISSUED STATEMENT		Copy B To Be Filed with Employee's FEDERAL Tax Return		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
f Employee's address and ZIP code		313012207		a Employee's soc. sec. no		14 Other MAPFML 521.34
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
MA	WTH-10814314-003	136669.77	6660.15			

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

b Employer's identification number c Employer's name, address, and ZIP code		58-2365695		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
INFOSMART TECHNOLOGIES, INC.  5400 LAUREL SPRINGS PKWY STE 706 SUWANEE GA 30024-6084		313012207		\$	211227.57	48330.00
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f Employee's address and ZIP code		313012207		This information is being furnished to the Internal Revenue Service		9
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PAVAN KUMAR GOUD SOMAGANI 203 LOUDON RD UNIT # 117 CONCORD NH 03301		REISSUED STATEMENT		Copy 2 for State, City, or Local Tax Departments		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
f Employee's address and ZIP code		313012207		a Employee's soc. sec. no		14 Other MAPFML 521.34
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
MA	WTH-10814314-003	136669.77	6660.15			

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

REV 12/20/21 OSP

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INFOSMART TECHNOLOGIES, INC.  5400 LAUREL SPRINGS PKWY STE 706 SUWANEE GA 30024-6084		313012207		\$	211227.57	48330.00
				12b	3 Social security wages	4 Social security tax withheld
				\$	142800.00	8853.60
				12c	5 Medicare wages and tips	6 Medicare tax withheld
e Employee's first name and initial Last name		313012207		\$	211227.57	3163.85
				12d	7 Social security tips	8 Allocated tips
f Employee's address and ZIP code		313012207		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.		9
				11 Nonqualified plans		10 Dependent care benefits
PAVAN KUMAR GOUD SOMAGANI 203 LOUDON RD UNIT # 117 CONCORD NH 03301		REISSUED STATEMENT		Copy 2 for State, City, or Local Tax Departments		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
f Employee's address and ZIP code		313012207		a Employee's soc. sec. no		14 Other MAPFML 521.34
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
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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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				11 Nonqualified plans		10 Dependent care benefits
PAVAN KUMAR GOUD SOMAGANI 203 LOUDON RD UNIT # 117 CONCORD NH 03301		REISSUED STATEMENT		Copy C for Employee's Records (see notice to Employee on back.)		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
f Employee's address and ZIP code		313012207		a Employee's soc. sec. no		14 Other MAPFML 521.34
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
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Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C For Employee's Records