

|   |  |   |  |   |  |   |  |
|---|--|---|--|---|--|---|--|
| <b>b Employer's Identification number</b><br>87-2248603   |  | <b>12a See instructions for Box 12</b>        |  | <b>1 Wages, tips, other compensation</b>              |  | <b>2 Federal income tax withheld</b>                  |  |
| <b>c Employer's name, address, and ZIP code</b><br>KAIZER SOFTWARE SOLUTIONS LLC<br>10700 SIKES PLACE STE 345<br>CHARLOTTE NC 28277-8147        |  | \$  |  | 33165.60  |  | 5641.62   |  |
| <b>e Employee's first name and initial</b><br>Last name<br>16210733<br>VYSHNAVI NIKITHA ATHMAKOOR<br>9326 GRAND VALLEY DR<br>CHARLOTTE NC 28213 |  | <b>12b</b><br>\$                              |  | <b>3 Social security wages</b>                        |  | <b>4 Social security tax withheld</b>                 |  |
| <b>f Employee's address and ZIP code</b>  |  | <b>12c</b><br>\$                              |  | <b>5 Medicare wages and tips</b>                      |  | <b>6 Medicare tax withheld</b>                        |  |
| <b>15 State</b><br>NC   |  | <b>Employer's state I.D. No.</b><br>601415415 |  | <b>16 State wages, tips, etc.</b><br>33165.60         |  | <b>17 State income tax</b><br>1525.00                 |  |
| Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service  |  | OMB # 1545-0008                               |  | Copy B To Be Filed With Employee's FEDERAL Tax Return |  | Copy B To Be Filed With Employee's FEDERAL Tax Return |  |

|   |  |   |  |  |  |  |  |
|---|--|---|--|--|--|--|--|
| <b>b Employer's Identification number</b><br>87-2248603   |  | <b>12a See instructions for Box 12</b>        |  | <b>1 Wages, tips, other compensation</b>                                 |  | <b>2 Federal income tax withheld</b>                                     |  |
| <b>c Employer's name, address, and ZIP code</b><br>KAIZER SOFTWARE SOLUTIONS LLC<br>10700 SIKES PLACE STE 345<br>CHARLOTTE NC 28277-8147        |  | \$  |  | 33165.60   |  | 5641.62  |  |
| <b>e Employee's first name and initial</b><br>Last name<br>16210733<br>VYSHNAVI NIKITHA ATHMAKOOR<br>9326 GRAND VALLEY DR<br>CHARLOTTE NC 28213 |  | <b>12b</b><br>\$                              |  | <b>3 Social security wages</b>   |  | <b>4 Social security tax withheld</b>                                    |  |
| <b>f Employee's address and ZIP code</b>  |  | <b>12c</b><br>\$                              |  | <b>5 Medicare wages and tips</b>   |  | <b>6 Medicare tax withheld</b>   |  |
| <b>15 State</b><br>NC   |  | <b>Employer's state I.D. No.</b><br>601415415 |  | <b>16 State wages, tips, etc.</b><br>33165.60                            |  | <b>17 State income tax</b><br>1525.00                                    |  |
| Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service  |  | OMB # 1545-0008                               |  | Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments |  | Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments |  |

REV 12/20/22 OSP

|   |  |   |  |  |  |  |  |
|---|--|---|--|--|--|--|--|
| <b>b Employer's Identification number</b><br>87-2248603   |  | <b>12a See instructions for Box 12</b>        |  | <b>1 Wages, tips, other compensation</b>                                 |  | <b>2 Federal income tax withheld</b>                                     |  |
| <b>c Employer's name, address, and ZIP code</b><br>KAIZER SOFTWARE SOLUTIONS LLC<br>10700 SIKES PLACE STE 345<br>CHARLOTTE NC 28277-8147        |  | \$  |  | 33165.60   |  | 5641.62  |  |
| <b>e Employee's first name and initial</b><br>Last name<br>16210733<br>VYSHNAVI NIKITHA ATHMAKOOR<br>9326 GRAND VALLEY DR<br>CHARLOTTE NC 28213 |  | <b>12b</b><br>\$                              |  | <b>3 Social security wages</b>   |  | <b>4 Social security tax withheld</b>                                    |  |
| <b>f Employee's address and ZIP code</b>  |  | <b>12c</b><br>\$                              |  | <b>5 Medicare wages and tips</b>   |  | <b>6 Medicare tax withheld</b>   |  |
| <b>15 State</b><br>NC   |  | <b>Employer's state I.D. No.</b><br>601415415 |  | <b>16 State wages, tips, etc.</b><br>33165.60                            |  | <b>17 State income tax</b><br>1525.00                                    |  |
| Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service  |  | OMB # 1545-0008                               |  | Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments |  | Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments |  |

|   |  |   |  |   |  |                                       |  |
|---|--|---|--|---|--|---------------------------------------|--|
| <b>b Employer's Identification number</b><br>87-2248603   |  | <b>12a See instructions for Box 12</b>        |  | <b>1 Wages, tips, other compensation</b>      |  | <b>2 Federal income tax withheld</b>  |  |
| <b>c Employer's name, address, and ZIP code</b><br>KAIZER SOFTWARE SOLUTIONS LLC<br>10700 SIKES PLACE STE 345<br>CHARLOTTE NC 28277-8147        |  | \$  |  | 33165.60                                      |  | 5641.62                               |  |
| <b>e Employee's first name and initial</b><br>Last name<br>16210733<br>VYSHNAVI NIKITHA ATHMAKOOR<br>9326 GRAND VALLEY DR<br>CHARLOTTE NC 28213 |  | <b>12b</b><br>\$                              |  | <b>3 Social security wages</b>                |  | <b>4 Social security tax withheld</b> |  |
| <b>f Employee's address and ZIP code</b>  |  | <b>12c</b><br>\$                              |  | <b>5 Medicare wages and tips</b>              |  | <b>6 Medicare tax withheld</b>        |  |
| <b>15 State</b><br>NC   |  | <b>Employer's state I.D. No.</b><br>601415415 |  | <b>16 State wages, tips, etc.</b><br>33165.60 |  | <b>17 State income tax</b><br>1525.00 |  |
| Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service  |  | OMB # 1545-0008                               |  | Copy C For Employee's Records                 |  | Copy C For Employee's Records         |  |