a Employee's SSN 809-36-5710	b Employer identification n	umber (EIN) 83-218	35245	OMB No. 1545-0008
C Employer's name, address, and ZIP code ANALYTICS9 SOLUTIONS INC	1 Wgs, tips, other compn 23629.00	2 Fed inc tax withheld 3089.00	3 Social security wages 23629.00	Form W-2
AI9 SOLUTIONS INC 3810 WINDERMERE PKWY	4 SS tax withheld 1465.00	5 Medicare wages & tips 23629.00	6 Medicare tax withheld 342.62	Wage and
STE 503 CUMMING GA 30041	7 Social security tips	8 Allocated tips	9	Tax Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2022
e Employee's name, address, and ZIP code Suff.	13 Statutory employee	14 Other	12b	
SUSHMA VENIGALLA 808 ARCADIA DR APT #2	Retirement plan		12c	Copy B To Be Filed with Employee's FEDERAL Tax Return
BLOOMINGTON IL 61704	Third-party sick pay		12d	This information is being furnished to the Internal Revenue Service.
15 State Employer's state ID number 16 State wages, tips, etc 1	7 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/21/22 QBDT

Department of the Treasury — IRS

a Employee's SSN 809-36-5710	b Employer identification n	umber (EIN) 83-218	35245	OMB No. 1545-0008
C Employer's name, address, and ZIP code ANALYTICS9 SOLUTIONS INC	1 Wgs, tips, other compn 23629.00	2 Fed inc tax withheld 3089.00	3 Social security wages 23629.00	Form W-2
AI9 SOLUTIONS INC 3810 WINDERMERE PKWY	4 SS tax withheld 1465.00	5 Medicare wages & tips 23629.00	6 Medicare tax withheld 342.62	Wage and Tax
STE 503 CUMMING GA 30041	7 Social security tips	8 Allocated tips	9	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2022
e Employee's name, address, and ZIP code Suff.	13 Statutory employee	14 Other	12b	Copy 2 To Be
SUSHMA VENIGALLA 808 ARCADIA DR APT #2	Retirement plan		12c	Filed With Employee's State, City, or Local
BLOOMINGTON IL 61704	Third-party sick pay		12d	Income Tax Return.
15 State Employer's state ID No. 16 State wages, tips, etc. 1' 1'	7 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/21/22 QBDT

a Employee's SSN 809-36-5710 b Employer identification number (EIN) 83-2185245	OMB No. 1545-0008				
	01110 110: 10-10 0000				
other constion may be imposed on you if this income is tayable and you fail to y	This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or				
ANALYTICS9 SOLUTIONS INC 1 Wgs, tips, other compn 2 Fed inc tax withheld 3 Social security					
AI9 SOLUTIONS INC 23629.00 3089.00 2362	· · · · · · · · · · · · · · · · · · ·				
4 SS tax withheid 5 Medicare wages & tips 6 Medicare tax v	Wage and				
CUMMING GA 30041 7 Social security tips 8 Allocated tips 9					
d Control No.	Statement				
10 Depdnt care benefits 11 Nonqualified plans 12a					
	2022				
e Employee's name, address, and ZIP code Suff. 13 14 Other 12b					
Statutory employee •					
SUSHMA VENIGALLA 12c	Copy C For				
808 ARCADIA DR APT #2 Retirement plan .	EMPLOYEE'S RECORDS.				
BLOOMINGTON IL 61704	(See Notice to				
Third-party sick pay	Èmployee.)				
15 State Employer's state ID No. 16 State wages, tips, etc 17 State income tax 18 Local wages, tips, etc 19 Local incom	e tax 20 Locality name				
┝╶──┫─────╆────┝─────┝					

REV 12/21/22 QBDT