

0429 1545-0028

COPY 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

| | | | |
|---|--|---|--|
| 1 Wages, tips, other compensation 28320.00 | | 2 Federal income tax withheld 2614.49 | |
| 3 Social security wages 28320.00 | | 4 Social security tax withheld 1755.84 | |
| 5 Medicare wages and tips 28320.00 | | 6 Medicare tax withheld 410.64 | |

a Employee's social security number
630-77-7619

c Employer's name, address and ZIP code
CYMANSYS SOLUTIONS LLC
3016 POLAR LN
SUITE 404
CEDAR PARK TX 78613

| | | | |
|------------------|------------|-------------|-------------------|
| d Control Number | Department | Corporation | Employer Use Only |
|------------------|------------|-------------|-------------------|

e Employee's name
KANTHI SAI SRI MADAKA
2313 BRAVO PASS
LEANDER TX 78641

| | | | |
|---|----------------------------|----------------------------|---------------------|
| f Employee's address and ZIP Code | 9 | 12a | \$ |
| b Employer identification number (EIN) 20-5830378 | 10 Dependent care benefits | 12b | \$ |
| 7 Social security tips | 11 Nonqualified plans | 12c | \$ |
| 8 Allocated tips | 14 Other | 12d | \$ |
| 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> | | 12e | \$ |
| 15 State | Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax |
| 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | |

Form **W-2** Wage and Tax Statement **2022** Department of the Treasury - Internal Revenue Service

0429 1545-0028

COPY 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

| | | | |
|---|--|---|--|
| 1 Wages, tips, other compensation 28320.00 | | 2 Federal income tax withheld 2614.49 | |
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e Employee's name
KANTHI SAI SRI MADAKA
2313 BRAVO PASS
LEANDER TX 78641

| | | | |
|---|----------------------------|----------------------------|---------------------|
| f Employee's address and ZIP Code | 9 | 12a | \$ |
| b Employer identification number (EIN) 20-5830378 | 10 Dependent care benefits | 12b | \$ |
| 7 Social security tips | 11 Nonqualified plans | 12c | \$ |
| 8 Allocated tips | 14 Other | 12d | \$ |
| 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> | | 12e | \$ |
| 15 State | Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax |
| 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | |

Form **W-2** Wage and Tax Statement **2022** Department of the Treasury - Internal Revenue Service

0429 1545-0028

COPY B - To Be Filed With Employers FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service

| | | | |
|---|--|---|--|
| 1 Wages, tips, other compensation 28320.00 | | 2 Federal income tax withheld 2614.49 | |
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a Employee's social security number
630-77-7619

c Employer's name, address and ZIP code
CYMANSYS SOLUTIONS LLC
3016 POLAR LN
SUITE 404
CEDAR PARK TX 78613

| | | | |
|------------------|------------|-------------|-------------------|
| d Control Number | Department | Corporation | Employer Use Only |
|------------------|------------|-------------|-------------------|

e Employee's name
KANTHI SAI SRI MADAKA
2313 BRAVO PASS
LEANDER TX 78641

| | | | |
|---|----------------------------|----------------------------|---------------------|
| f Employee's address and ZIP Code | 9 | 12a | \$ |
| b Employer identification number (EIN) 20-5830378 | 10 Dependent care benefits | 12b | \$ |
| 7 Social security tips | 11 Nonqualified plans | 12c | \$ |
| 8 Allocated tips | 14 Other | 12d | \$ |
| 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> | | 12e | \$ |
| 15 State | Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax |
| 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | |

Form **W-2** Wage and Tax Statement **2022** Department of the Treasury - Internal Revenue Service

0429 1545-0028

COPY C - For EMPLOYEE'S RECORDS (See Notice to Employees Below)

| | | | |
|---|--|---|--|
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a Employee's social security number
630-77-7619

c Employer's name, address and ZIP code
CYMANSYS SOLUTIONS LLC
3016 POLAR LN
SUITE 404
CEDAR PARK TX 78613

| | | | |
|------------------|------------|-------------|-------------------|
| d Control Number | Department | Corporation | Employer Use Only |
|------------------|------------|-------------|-------------------|

e Employee's name
KANTHI SAI SRI MADAKA
2313 BRAVO PASS
LEANDER TX 78641

| | | | |
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| b Employer identification number (EIN) 20-5830378 | 10 Dependent care benefits | 12b | \$ |
| 7 Social security tips | 11 Nonqualified plans | 12c | \$ |
| 8 Allocated tips | 14 Other | 12d | \$ |
| 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> | | 12e | \$ |
| 15 State | Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax |
| 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | |

Form **W-2** Wage and Tax Statement **2022** Department of the Treasury - Internal Revenue Service

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.