<b>a</b> Employee's SSN 652-29-6356	<b>b</b> Employer identification n	<b>b</b> Employer identification number (EIN) 20 - 8234378			
c Employer's name, address, and ZIP code NEW YORK GLOBAL CONSULTANTS INC.		<b>1</b> Wgs, tips, other compn 54702.43	2 Fed inc tax withheld 10771.00	3 Social security wages 54702.43	Form <b>W-2</b>
626 RXR PLAZA		<b>4</b> SS tax withheld 3391.55	<b>5</b> Medicare wages & tips 54702.43	6 Medicare tax withheld 793.19	Wage and Tax
6TH FLOOR, SUITE #668 UNIONDALE NY 11556		7 Social security tips	8 Allocated tips	9	Statement
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a	
Employee's name, address, and ZIP code     Suff.		13	14 Other	12b	2022
		Statutory employee .		Ì	
SRIVATSAV NARSIMHA RAO PANUGANTI 2200 GOLDEN HORSESHOE CIR, APT D		Retirement plan		12c 	Copy B To Be Filed with Employee's FEDERAL Tax Return
MORRISVILLE NC 27560		Treament plan 1 1		12d	This information is being furnished to the Internal Revenue Service.
15 State Employer's state ID number 16 State wage	s, tips, etc 1	Third-party sick pay  7 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
	702.43	2526.00			.
REV 12/21/22 QBDT				<b> </b> Depai	tment of the Treasury — IRS
<b>a</b> Employee's SSN 652-29-6356		<b>b</b> Employer identification r	<del>'</del>		OMB No. 1545-0008
c Employer's name, address, and ZIP code NEW YORK GLOBAL CONSULTANTS	INC.	1 Wgs, tips, other compn 54702.43	2 Fed inc tax withheld 10771.00	3 Social security wages 54702.43	Form <b>W-2</b>
626 RXR PLAZA 6TH FLOOR, SUITE #668		4 SS tax withheld 3391.55	5 Medicare wages & tips 54702.43	6 Medicare tax withheld 793.19	Wage and Tax
UNIONDALE NY 11556		<b>7</b> 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	14 Other 12b		2022
SRIVATSAV NARSIMHA RAO PANUGANTI		Statutory employee.		40-	Copy 2 To Be Filed With
2200 GOLDEN HORSESHOE CIR, APT D		Retirement plan		12c 	Employee's State, City, or Local
MORRISVILLE NC 27560		Third-party sick pay		12d	Income Tax Return.
15 State         Employer's state ID No.         16 State wage           NC         208234378         54	es, tips, etc . 702.43	7 State income tax 2526.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name
REV 12/21/22 QBDT					
a Employee's SSN 652-29-6356 C Employer's name, address, and ZIP code		<b>b</b> Employer identification r	nished to the IRS. If you are re	quired to file a tax return, a ne	OMB No. 1545-0008
NEW YORK GLOBAL CONSULTANTS	INC.	other sanction may be impose  1 Wgs, tips, other compn	sed on you if this income is tax  2 Fed inc tax withheld	<b>3</b> Social security wages	\A/ 2
   626 RXR PLAZA		54702.43  4 SS tax withheld	10771.00 <b>5</b> Medicare wages & tips	54702.43	Form <b>W-2</b>
6TH FLOOR, SUITE #668		3391.55	54702.43	6 Medicare tax withheld 793.19	Wage and
UNIONDALE NY 11556  d Control No.		7 Social security tips	8 Allocated tips	9	Tax Statement
d Contonio.		10 Depdnt care benefits	11 Nonqualified plans	12a	
e Employee's name, address, and ZIP code Suff.		13	14 Other	12b	2022
SRIVATSAV NARSIMHA RAO PANUGANTI 2200 GOLDEN HORSESHOE CIR, APT D		Statutory employee		12c	Copy C For EMPLOYEE'S RECORDS.
MORRISVILLE NC 27560		Third-party sick pay		12d	(See Notice to Employee.)
15 State Employer's state ID No. NC   208234378   16 State wage	es, tips, etc 2702.43	7 State income tax 2526.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name