

Copy B-To Be Filed With Employee's Federal Tax Return.		41-0852411 OMB No. 1545-0008	
a Employee's soc. sec. no. XXX-XX-9322	1 Wages, tips, other comp. 24786.00	2 Federal income tax withheld 2821.00	
	3 Social security wages 24786.00	4 Social security tax withheld 1536.73	
b Employer ID number (EIN) 43-2053994	5 Medicare wages and tips 24786.00	6 Medicare tax withheld 359.40	
c Employer's name, address, and ZIP code NIC INFO TEK INC. 13224 TELECOM DR. TEMPLE TERRACE FL 33637			
d Control number 93			
e Employee's name, address, and ZIP code Suff. SAI KISHORE K. LAKKAMPALLY 47 EDRIS LN MECHANICSBURG PA 17050			
7 Social security tips	8 Allocated tips	9 Verification code	
10 Dependent care benefits	11 Nonqualified plans	12a Code	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
PA 9462 4236	24786.00	613.56	
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** Dept. of the Treasury -- IRS
This information is being furnished to the Internal Revenue Service.
DAA

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Form W-2 Wage and Tax Statement **2022** Dept. of the Treasury -- IRS
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Form W-2 Wage and Tax Statement **2022** Dept. of the Treasury -- IRS
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Form W-2 Wage and Tax Statement **2022** Dept. of the Treasury -- IRS
DAA

Department of the Treasury—Internal Revenue Service

d Control number 58364	1 Wages, tips, other compensation 46099.06	2 Federal income tax withheld 5754.88
OMB NO. 1545-0008	3 Social security wages 46099.06	4 Social security tax withheld 2858.14
	5 Medicare wages and tips 46099.06	6 Medicare tax withheld 668.44
c Employer's name, address and ZIP code PENN STATE HEALTH 100 CRYSTAL A DRIVE PO BOX 804 CA522 HERSHEY PA 17033		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 64.28
12b DD 21828.18	12c	12d
b Employer identification number (EIN) 47-3769205		a Employee's social security number 128-17-9720
13 Statutory employee	Retirement plan	Third-party sick pay
	X	
14 Other PA UI 31.58		
e Employee's name, address and ZIP code Vandana Dhodlolla 47 Edris Ln Mechanicsburg PA 17050		
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.		
2022	15 State PA Employer's state I.D. No. 20091603	16 State wages, tips, etc. 48404.03
Form W-2 Wage and Tax Statement		17 State income tax 1486.05
Copy C For EMPLOYEE'S RECORDS		18 Local wages, tips, etc. 48404.03
(See Notice to Employee on back of Copy B.)		19 Local income tax 822.87
		20 Locality name 210404-22

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d Control number 007620229720	1 Wages, tips, other compensation 27048.00	2 Federal income tax withheld 2646.58
41-0852411 OMB No. 1545-0008	3 Social security wages 27048.00	4 Social security tax withheld 1676.97
	5 Medicare wages and tips 27048.00	6 Medicare tax withheld 392.19

c Employer's name, address, and ZIP code
Trustminds Inc.
1681 East Auburn Road, Suite G
Rochester, MI 48307

7 Social security tips	8 Allocated tips	9
10 Dependant care benefits	11 Nonqualified plans	12a
12b	12c	12d

b Employer identification number (EIN) 80-0367504	a Employee's social security number 128-17-9720
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13 Statutory employee	Retirement plan	Third-party sick pay	14 Other PA SUTA 16.22
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e Employee's first name and initial Last name Suff
Vandana Dhodlolla
47 Edris Lane
Mechanicsburg PA 17050

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f Employee's address, and ZIP code 2022	15 State PA Employer's state ID number 821559004	16 State wages, tips, etc. 27048.00
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17 State income tax 830.38	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement
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www.irs.gov/efile Department of the Treasury—Internal Revenue Service

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Department of the Treasury—Internal Revenue Service

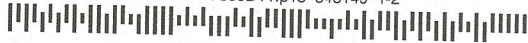
Provident Funding
P.O. Box 5914
Santa Rosa, CA 95402-5914

Toll Free Number
(800) 696-8199

Reporting Date 12/31/2022
Loan ID 3831090347
OMB No. 1545-0901
Mortgage Interest Statement
Recipient Federal ID Number 84-1147955
Customer's Tax ID Number XXX-XX-9322
Property Address

47 EDRIS LANE
MECHANICSBURG PA 17050

521.1.173166 1 AB 0.488 77850D11.p18 843149 1-2



SAI KISHORE KUMAR LAKKAMPALLY
47 EDRIS LANE
MECHANICSBURG PA 17050-7815



2022

Principal Balance Information	
Ending Principal Balance (as of 12/31/22)	342,146.16
Principal Applied in current reporting year	-21,113.36
Negative Amortization	0.00
Assistance Amount	0.00

Escrow Information	
Beginning Balance	2,845.75
Deposits	6,867.96
Property Taxes	-6,296.72
Insurance	-762.00
Other Disbursements	0.00
Ending Balance	2,654.99

Interest Paid Information	
Interest Paid on Escrow	0.00
Interest Paid on Loss Draft	0.00

FORM 1099-INT - Interest Income	
1 Interest Income	0.00

See 1098 and 1099 Instructions below and on back

FORM 1098 - Tax And Interest Information	
1 Mortgage interest received from payer(s)/borrower(s)	7,072.36
2 Outstanding Mortgage Principal as of January 1st, 2022	363,259.52
3 Mortgage Origination Date	11/03/2021
4 Refund of Overpaid Interest	0.00
5 Mortgage Insurance Premiums	0.00
6 Points paid on purchase of principal residence	0.00
7 If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.	<input checked="" type="checkbox"/>
8 Address or Description of Property Securing Mortgage	
9 Number of Properties Securing the Mortgage	
10 Real Estate Taxes Paid	6,296.72
11 Mortgage Acquisition Date	

FORM 1098 INFORMATION:

Instructions for Payer/Borrower

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or business and, in the course of such trade or business, received from you at least \$600 of mortgage interest (including certain points) on any one mortgage in the calendar year must furnish this statement to you.

If you received this statement as the payer of record on a mortgage on which there are other borrowers, furnish each of the other borrowers with information about the proper distribution of amounts reported on this form. Each borrower is entitled to deduct only the amount each borrower paid and points paid by the seller that represent each borrower's share of the amount allowable as a deduction. Each borrower may have to include in income a share of any amount reported in box 4.

If your mortgage payments were subsidized by a government agency, you may not be able to deduct the amount of the subsidy. See the instructions for Schedule A, C, or E (Form 1040) for how to report the mortgage interest. Also, for more information, see Pub. 936 and Pub. 535.

Payer's/Borrower's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (SSN, ITIN, ATIN, or EIN). However, the issuer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the lender has assigned to distinguish your account.