		1 Wgs, tips, other compn 55733.31	Fed inc tax withheld 6739.00	3 Social security wages 55733.31	Form W-2
TEKVANA INC		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
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IRVING	TX 75039-2482	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 Zi	P code Suff	13 Statutory employee.	14 Other	12b	
JANI BASHA SH	IAIK	Statutory employee:		12c	Copy B To Be Filed with Employee's FEDERAL
2512 BRIARCLIFF D	RIVE	Retirement plan			Tax Return This information is being
IRVING	TX 75062	Third-party sick pay		12d	furnished to the Internal Revenue Service.
15 State Employer's state ID numb	er 16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
	<u>- † </u>	<u> </u>			
REV 12/21/22 QBDT					rtment of the Treasury — IRS
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STE 225 IRVING	TX 75039-2482	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	14 Other	12b	2022
JANI BASHA SHAIK		Statutory employee.		10	Copy 2 To Be Filed With
2512 BRIARCLIFF DRIVE		Retirement plan		12c 	Employee's State,
IRVING	TX 75062	Third-party sick pay		12d	City, or Local Income Tax Return.
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15 State Employer's state ID No.	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
15 State Employer's state ID No.	16 State wages, tips, etc		18 Local wages, tips, etc	19 Local income tax	20 Locality name
15 State Employer's state ID No.	16 State wages, tips, etc		18 Local wages, tips, etc	19 Local income tax	20 Locality name
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b Employer identification number (EIN)

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OMB No. 1545-0008

a Employee's SSN 183-91-5224