Copy B To Be Filed W FEDERAL Tax Return	. ,	2022 OMB No. 1545-0008	Copy 2 To Be Filed Wi		2022 OMB No 1545-000
a. Employee's SSN		2 Federal income tax withheld 16263.03	a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld 16263.03
XXX-XX-0942		4 Social security tax withheld	XXX-XX-0942	3 Social security wages	4 Social security tax withheld
b. Employer ID number	103457.30	6414.35	b. Employer ID number	103457.30	6414.35
86-1943786	103457.30	6 Medicare tax withheld 1500.13	86-1943786	5 Medicare wages and tips 103457.30	6 Medicare tax withheld 1500.13
c. Employer's name, address Savvients In			c. Employer's name, address Savvients Inc	s , and ZIP code	
	Rd Suite 202		1490 S Price	Rd Suite 202	
Chandler, AZ	85286		Chandler, AZ	85286	
d. Control number			d. Control number		
9 e. Employee's name, addre	ess. and ZIP code		e. Employee's name, address	and ZIP code	
Sai Chaitany			Sai Chaitanya		
_	St, Apt 2316		8625 Hickory		
Frisco, TX 7	5034		Frisco, TX 75		
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee 1	14 Other	12b Code	13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code	Retirement plan		12c Code
Third party sick pay		12d Code	Third party sick pay		12d Code
TX			TX		
15 State Emplr.'s state I	ID # 16 State wages, tips, etc.	17 State income tax	15 State Emplr.'s state ID	# 16 State wages, tips, etc.	17 State income tax
18 Local wages, tips,etc.	19 Local income tax	20 Locality name	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
			AWW2-B22C Copy 2 To Be Filed Wi City, or Local Income		2022 OMB No 1545-000
a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld 16263.03	a. Employee's SSN		2 Federal income tax withheld 16263.0
XXX-XX-0942	3 Social security wages	4 Social security tax withheld	XXX-XX-0942	3 Social security wages	4 Social security tax withheld
b. Employer ID number	103457.30 5 Medicare wages and tips	6414.35 6 Medicare tax withheld	b. Employer ID number	103457.30 5 Medicare wages and tips	6414.3
86-1943786	103457.30	1500.13	86-1943786	103457.30	1500.1
c. Employer's name, addre			c. Employer's name, address		
Savvients In			Savvients Inc		
1490 S Price Rd Suite 202 Chandler, AZ 85286			Chandler, AZ 85286		
d. Control number			d. Control number		
9	. 70		9		
e. Employee's name, address, and ZIP code Sai Chaitanya Yendluri			e. Employee's name, address, and ZIP code Sai Chaitanya Yendluri		
8625 Hickory St, Apt 2316			8625 Hickory St, Apt 2316		
Frisco, TX 7	5034		Frisco, TX 75	034	
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips	
10 Dependent care benefi	its 11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee 1	4 Other	12b Code	13 Statutory employee 1	4 Other	12b Code
Retirement plan		12c Code	Retirement plan		12c Code
Third party sick pay		12d Code	Third party sick pay		12d Code
TX			TX		
15 State Emplr.'s state	ID# 16 State wages, tips, etc.	17 State income tax	15 State Emplr.'s state ID	# 16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	18 Local wages, tips, et c.	19 Local income tax	20 Locality name
Form W-2 Wage and Tax	Statement 39-1908647	Dept. of the Treasury IRS	Form W-2 Wage and Tax	State ment 39-1908647	Dept. of the Treasury IR:

OMB No.

Copy 2 To Be Filed With Employee's State,

Copy B To Be Filed With Employee's