Copy B To Be F FEDERAL Tax R	iled wit	th Employee's	<b>2022</b> OMB No. 1545-0008	Copy 2 To Be Fi City, or Local Inc	led With Employee's Sta	ate, 2022 OMB No. 1545-0008		
a Employee's SSN	ŭ	s, tips, other comp. 59227.71	2 Federal income tax withheld 9934.00	a Employee's SSN	1 Wages, tips, other comp. 59227.7			
650-94-9141	3 Social	security wages 59227.71	4 Social security tax withheld 3672.12		3 Social security wages 59227.7	4 Social security tax withheld 3672.12		
<b>b</b> Employer ID no. (EIN) 81–0845325	5 Medica	are wages and tips 59227.71	6 Medicare tax withheld 858.80	<b>b</b> Employer ID no. (EIN) 81-0845325	5 Medicare wages and tips 59227.7	6 Medicare tax withheld 858.80		
c Employer's name, ac SAGGI SOLI	dress, and UTION	d ZIP code NS INC		c Employer's name, add	dress, and ZIP code JTIONS INC	-		
25050 RID	ING F	PLZ NUM 13066	3	25050 RIDI	ING PLZ NUM 130	663		
SOUTH RID	ING		VA 20152	SOUTH RIDING VA 20152				
d Control number				d Control number				
e Employee's name, as HARINATH 1 4201 MONT AUSTIN	REDDY		Suff. I # TX 78749		ddress, and ZIP code REDDY NUSSAM EREY OAKS BLVD, 2	Suff. APT # TX 78749		
7 Social security tips	8	8 Allocated tips	9	7 Social security tips	8 Allocated tips	9		
10 Dependent care benefits		1 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care bene	fits 11 Nonqualified plans	12a Code See inst. for box 12		
13 14 Other Statutory employee		12b Code	13 14 Other Statutory employee		<b>12b</b> Code			
Retirement Plan			12c Code	Retirement Plan		12c Code		
Third-party sick pay			12d Code	Third-party sick pay		12d Code		
15 State Employer's s		mber 16 State wages, tip	us, etc. 17 State income tax 20 Locality name	15 State Employer's state 18 Local wages, tips, etc		s, tips, etc. 17 State income tax 20 Locality name		
Form W-2 Wage and Ta This information is being furn	ax Statements	ent Internal Revenue Service.	Dept. of the Treasury - IRS	Form W-2 Wage and Tax	x Statement	Dept. of the Treasury - IRS		
This information is being furn	ished to the	Internal Revenue Service. If you at	re required to file a tax return, a negligence and you fail to report it.		REV 12/21/22 QBD	Т		
Copy C For EMI			2022	Copy 2 To Be Fi	led With Employee's Sta	ate, 2022		

	PLOYEE'S RE	2022			
(See Notice to E			OMB No. 1545-0008		
a Employee's SSN	1 Wages, tips, other comp.		2 Federal income tax withheld		
, ,		59227.71		9934.00	
650-94-9141	3 Social security wages		4 Social security tax withheld		
<b>b</b> Employer ID no. (EIN)	59227.71		3672.12		
01 0045305	5 Medicare wages and tips		6 Medicare tax withheld		
81-0845325		59227.71	858.80		
c Employer's name, ac SAGGI SOLI 25050 RID	UTIONS II	NC	3		
SOUTH RID	20152				
d Control number				-	
HARINATH 1 4201 MONT AUSTIN			T # TX	78749	
7 Social security tips	8 Allocat	8 Allocated tips			
10 Dependent care bene	efits 11 Nonqu	11 Nonqualified plans		12a Code See inst. for box 12	
13	14 Other	ther		12b Code	
Statutory employee				12c Code	
	l			lo.	
Retirement Plan			120 000	de	
Retirement Plan			12d Cod		
		1			
Third-party sick pay			<b>12d</b> Coo	de	
Third-party sick pay		<b>16</b> State wages, tip	12d Coo	de 7 State income tax	
Retirement Plan  Third-party sick pay  15 State Employer's stat  18 Local wages, tips, et		16 State wages, tip	<b>12d</b> Coo	de 7 State income tax	

City, or Local Inc	come Tax Ref	OMB No. 1545-0008							
a Employee's SSN	1 Wages, tips, ot	her comp.	2 Federal income tax withheld						
		59227.71	9934.0	0					
650-94-9141	3 Social security	· ·	4 Social security tax withheld						
<b>b</b> Employer ID no. (EIN)		59227.71	3672.12						
	5 Medicare wage	•	6 Medicare tax withheld						
81-0845325		59227.71	858.80						
c Employer's name, address, and ZIP code SAGGI SOLUTIONS INC									
25050 RIDING PLZ NUM 130663									
SOUTH RID	ING	VA 20152							
d Control number									
e Employee's name, address, and ZIP code Suff.									
HARINATH I	REDDY NUS	SSAM							
4201 MONT	4201 MONTEREY OAKS BLVD, APT #								
AUSTIN	TX 78749								
7 Social security tips	8 Allocate	ed tips	9						
10 Dependent care bene	fits 11 Nonqua	alified plans	12a Code See inst. for box 12						
13	14 Other		12b Code						
Statutory employee			12c Code						
Retirement Plan			<b>12d</b> Code						
Third-party sick pay									
15 State Employer's stat	e ID number	os, etc. 17 State income tax							
18 Local wages, tips, etc	c. 19 Local in	ncome tax	20 Locality name						
Form W-2 Wage and Tax Statement Dept. of the Treasury - II									