| Copy B To Be Filed With Employee's 2022 | | | | | | | |
|--|--------------------|--|-------------------------|---|---------------------|--|--|
| a Employee's soc. sec. no. 182-49-4983 | | 1 Wages, tips, other comp. 42617.00 | | 2 Federal income tax withheld | | | |
| | | 3 Social security wages | | 5458.45 4 Social security tax withheld | | | |
| b Employer ID number | Employer ID number | | 15097.00 | | 936.01 | | |
| 27-2716470 | | 5 Medicare v 15097 | vages and tips .00 | 6 Medicare tax withheld 218.91 | | | |
| c Employer's name, address, and ZIP code POSITIVE GROUP LLC | | | | | | | |
| 4080 MCGINNIS FERRY RD STE 1206 | | | | | | | |
| ALPHARETTA, GA 30005 | | | | | | | |
| d Control number 000000001 Emp#163 | | | | | | | |
| e Employee's name, addre | ess, and ZIP | code | | | | | |
| SAI MANIDEEP ALLU | | | | | | | |
| 230 WESTFIELD DR, | | | | | | | |
| GEORGETOWN, | | | | | | | |
| , TX 78628-7218 | | | | | | | |
| 7 Social security tips | | 8 Allocated tip | s | | | | |
| 10 Dependent care benefi | ts | 11 Nonqualified plans | | ^{12a Code} DD 3875.00 | | | |
| 13 Statutory employee | 14 Other | | 46492.00 | 12b Code | | | |
| Retirement plan | | | | 12c Code | | | |
| Third-party sick pay | | | | 12d Code | | | |
| TX EXEM | PT | | 42617.00 | | | | |
| 15 State Employer's | state ID num | nber | 16 State wages, tips, e | tc | 17 State income tax | | |
| 18 Local wages, tips, etc | | 19 Local income tax | | 20 Locality name | | | |

| Copy 2 To Be Filed With Employee's State, City or Local Income Tax Return | | | | | 2022 | |
|--|--------------------------------|-------------------------------------|---|--|--------------------------------|--|
| a Employee's | Employee's soc. sec. no. | | ¹ Wages, tips, other comp. 42617.00 | | 2 Federal income tax withheld | |
| 182-49-4983 | | | | | 5458.45 | |
| | | 3 Social security wages 15097.00 | | 4 Social security tax withheld 936.01 | | |
| 27-2716470 | | | ⁵ Medicare 15097 | wages and tips | 6 Medicare tax withheld 218.91 | |
| c Employer's r POSITIVE (| | | code | | 1 | |
| 4080 MCGI | NNIS FERF | RY RD S | TE 1206 | | | |
| ALPHARET | TA, GA 300 | 005 | | | | |
| d Control num | | 000000 #163 |)1 | | | |
| e Employee's | | s, and ZIP | code | | | |
| SAI MANIDE 230 WESTF | | | | | | |
| GEORGETO | , | | | | | |
| , TX 78628- | 7218 | | | | | |
| | | | | | | |
| 7 Social security tips | | 8 Allocated tips | | | | |
| 10 Dependent care benefits | | 11 Nonaualified plans | | ^{12a Code} DD 3875.00 | | |
| 13 Statutory e | 13 Statutory employee 14 Other | | ss 46492.00 | | 12b Code | |
| Retirement plan | | | | 12c Cc | de | |
| Third-party sick pay | | | | 12d Co | de | |
| TX EXEMPT | | 42617.00 | | | | |
| TX | EXEMI | -1 | | 42617.00 | | |

19 Local income tax

20 Locality name

Form W-2 Wage and Tax Statement This information is being furnished to the Internal Revenue Service

| Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on back) 2022 | | | | | | | |
|---|----------------|-----------------------|---|--|---|--|--|
| a Employee's soc. sec. no. 182-49-4983 | | | ¹ Wages, tips, other comp. 42617.00 | | ² Federal income tax withheld 5458.45 | | |
| b Employer ID number | | | ³ Social security wages 15097.00 | | 4 Social security tax withheld 936.01 | | |
| 27-2716470 | | 5 Medicare v 15097 | vages and tips .00 | ⁶ Medicare tax withheld 218.91 | | | |
| c Employer's name, address, and ZIP code POSITIVE GROUP LLC | | | | | | | |
| 4080 MCGINNIS FERR ALPHARETTA, GA 300 | | ΓE 1206 | | | | | |
| d Control number 000000001 Emp#163 | | | | | | | |
| e Employee's name, addres | | code | | | | | |
| SAI MANIDEEP ALLU | | | | | | | |
| 230 WESTFIELD DR, | | | | | | | |
| GEORGETOWN, | | | | | | | |
| , TX 78628-7218 | | | | | | | |
| 7 Social security tips | | 8 Allocated tip | S | | | | |
| 10 Dependent care benefits | | 11 Nonaualified plans | | ^{12a Code} DD 3875.00 | | | |
| 13 Statutory employee 14 Other GRO | | SS 46492.00 | | 12h Code | | | |
| Retirement plan | | | | 12c Code | | | |
| Third-party sick pay | | | | 12d Code | | | |
| TX EXEMP | PT | | 42617.00 | | | | |
| 15 State Employer's sta | tate ID number | | 16 State wages, tips, e | tc | 17 State income tax | | |
| 18 Local wages, tips, etc | | 19 Local income tax | | | 20 Locality name | | |

Form W-2 Wage and Tax Statement 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 implosed on you if this income is taxable and you fail to report it.

Form W-2 Wage and Tax Statement

18 Local wages, tips, etc

| Copy 2 To Be Filed With Employee's State, City or Local Income Tax Return 2022 | | | | | | | | |
|---|---|---------------------------------------|---|---|--|---------------------|--|--|
| | Employee's soc. sec. no. 182-49-4983 Employer ID number | | ¹ Wages, tips, other comp. 42617.00 | | ² Federal income tax withheld 5458.45 | | | |
| b Employer I | | | ³ Social security wages 15097.00 | | 4 Social security tax withheld 936.01 | | | |
| 27-2716470 | | 5 Medicare wages and tips 15097.00 | | ⁶ Medicare tax withheld 218.91 | | | | |
| c Employer's name, address, and ZIP code POSITIVE GROUP LLC | | | | | | | | |
| 4080 MCGINNIS FERRY RD STE 1206 | | | | | | | | |
| ALPHARE | TTA, GA 30 | 005 | | | | | | |
| d Control number 000000001 Emp#163 | | | | | | | | |
| e Employee's name, address, and ZIP code | | | | | | | | |
| | SAI MANIDEEP ALLU | | | | | | | |
| | 230 WESTFIELD DR, | | | | | | | |
| GEORGETOWN, . TX 78628-7218 | | | | | | | | |
| , 1 / 10020-1210 | | | | | | | | |
| 7 Social security tips 8 | | | 8 Allocated tip | os | | | | |
| 10 Dependent care benefits 11 Nonqualifi | | ed plans 12a Code DD 3875.0 | | | | | | |
| 13 Statutory | 3 Statutory employee 14 Other GROSS | | SS | 46492.00 | 12b Code | | | |
| Retirement plan Third-party sick pay | | | | | | 12c Code | | |
| | | | | | | 12d Code | | |
| ТΧ | EXEMPT | | | 42617.00 | | | | |
| 15 State | Employer's st | ate ID num | iber | 16 State wages, tips, e | tc | 17 State income tax | | |
| 18 Local wages, tips, etc | | 19 Local income tax | | 20 Locality name | | | | |
| | | | | | | | | |

Form W-2 Wage and Tax Statement