

b Employer's Identification number c Employer's name, address, and ZIP code		90-0525453		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
OQ POINT LLC				\$	11760.00	2073.15
2473 152ND AVE NE				12b	3 Social security wages	4 Social security tax withheld
REDMOND WA 98052				\$	11760.00	729.12
e Employee's first name and initial		Last name		12c	5 Medicare wages and tips	6 Medicare tax withheld
RAMA KRISHNA MANI KANTA YALLA		8502674		\$	11760.00	170.52
732 SUFFIELD WAY				12d	7 Social security tips	8 Allocated tips
CARY NC 27519				\$		
f Employee's address and ZIP code				This information is being furnished to the Internal Revenue Service		9
15 State		Employer's state I.D. No.		Copy B To Be Filed with Employee's FEDERAL Tax Return		10 Dependent care benefits
NC		Applied For		11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay
16 State wages, tips, etc.		17 State income tax		14 Other		
11760.00		537.00		a Employee's soc. sec. no		
				161-43-4139		
18 Local wages, tips, etc.		19 Local income tax		20 Locality name		

Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

b Employer's Identification number c Employer's name, address, and ZIP code		90-0525453		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
OQ POINT LLC				\$	11760.00	2073.15
2473 152ND AVE NE				12b	3 Social security wages	4 Social security tax withheld
REDMOND WA 98052				\$	11760.00	729.12
e Employee's first name and initial		Last name		12c	5 Medicare wages and tips	6 Medicare tax withheld
RAMA KRISHNA MANI KANTA YALLA		8502674		\$	11760.00	170.52
732 SUFFIELD WAY				12d	7 Social security tips	8 Allocated tips
CARY NC 27519				\$		
f Employee's address and ZIP code				Copy 2 for State, City, or Local Tax Departments		9
15 State		Employer's state I.D. No.		11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay
NC		Applied For		14 Other		
16 State wages, tips, etc.		17 State income tax		a Employee's soc. sec. no		
11760.00		537.00		161-43-4139		
18 Local wages, tips, etc.		19 Local income tax		20 Locality name		

Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

REV 12/20/22 OSP

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2473 152ND AVE NE				12b	3 Social security wages	4 Social security tax withheld
REDMOND WA 98052				\$	11760.00	729.12
e Employee's first name and initial		Last name		12c	5 Medicare wages and tips	6 Medicare tax withheld
RAMA KRISHNA MANI KANTA YALLA		8502674		\$	11760.00	170.52
732 SUFFIELD WAY				12d	7 Social security tips	8 Allocated tips
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f Employee's address and ZIP code				Copy 2 for State, City, or Local Tax Departments		9
15 State		Employer's state I.D. No.		11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay
NC		Applied For		14 Other		
16 State wages, tips, etc.		17 State income tax		a Employee's soc. sec. no		
11760.00		537.00		161-43-4139		
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Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

b Employer's Identification number c Employer's name, address, and ZIP code		90-0525453		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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RAMA KRISHNA MANI KANTA YALLA		8502674		\$	11760.00	170.52
732 SUFFIELD WAY				12d	7 Social security tips	8 Allocated tips
CARY NC 27519				\$		
f Employee's address and ZIP code				Copy C for Employee's Records (see notice to Employee on back.)		9
15 State		Employer's state I.D. No.		11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay
NC		Applied For		14 Other		
16 State wages, tips, etc.		17 State income tax		a Employee's soc. sec. no		
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