Form W-2 W	age and Tax Statement 2022	OMB No. 1545-000	08		Depa	rtment of the Treasury - Int	ternal Revenue Service	
Control nun 696255423		Employer identifi 52-6000980	Employer identification number 52-6000980		COPY B To Be Filed With Employee's FEDERAL Tax Return			
Montgo	er's name, address and zip code mery County MD nroe Street	Employee's SSN 798-15-0873			tips, other compensation	2 Federal income tax withheld 12416.14		
	lle MD 20850	7 Social security	7 Social security tips		curity wages	4 Social security tax withheld 6827.91		
Employe	ee's first name and init Last Name	8 Allocated tips	8 Allocated tips		e wages and tips	6 Medicare tax withheld 1596.85		
Mahitha Reddivari 22428 Bright Sky DR Clarksburg MD 20871			9	9		lent care benefits	11 Nonqualified plans	
			12a DD	12b G 20500.00		y Employee	14 Other	
						ent Plan		
Employe	ee's address and ZIP code	12c 12d		Third-pa	rty sick pay			
15 State MD	Employer's State ID number 00328524	16 State wages, tips etc. 1 84920.89	7 State income tax 6308.85	18 Local wages	, tips etc.	19 Local income tax	20 Locality name	
This information	is being furnished to the Internal Revenue	e Service						
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	age and Tax Statement 2022	OMB No. 1545-00	08			Department of the Treas	sury - Internal Revenue Service	
Control num 696255423	ber	Employer identification 52-6000980	Employer identification number 52-6000980		COPY C For Employee's Records (See Notice to Employee on back of Copy B)			
Employe	r's name, address and zip code		Employee's SSN		1 Wagge tipe other compandation 2 Federal:			

		Employer identific	nation number	CODY CE				
Control number 696255423			Employer identification number 52-6000980		Department of the Treasury - Internal Revenue Service COPY C For Employee's Records (See Notice to Employee on back (Copy B)			
Employer's name, address and zip code Montgomery County MD 101 Monroe Street Rockville MD 20850 Employee's first name and init Last Name Suffix			Employee's SSN 798-15-0873		1 Wages, tips, other compensation 84920.89		2 Federal income tax withheld 12416.14	
			7 Social security tips 8 Allocated tips		3 Social security wages 110127.54 5 Medicare wages and tips 110127.54		4 Social security tax withheld 6827.91 6 Medicare tax withheld 1596.85	
Sky DR D 20871	12a DD	23176.40	13 Statutory	13 Statutory Employee		14 Other		
	12b G	20500.00	Retirement Plan		X			
Employee's address and ZIP code			12c 12d		Third-party sick pay			
oyer's State ID number 8524	16 State wages, tips etc. 17 State income tax 18 Local v 84920.89 6308.85		18 Local wage	ges, tips etc. 19 Local income tax			20 Locality name	
t i	ame and init Last Name Reddiva Sky DR D 20871 ss and ZIP code oyer's State ID number	ame and init Last Name Reddivari Sky DR D 20871 ss and ZIP code oyer's State ID number 16 State wages, tips etc.	Treet 20850 798-15-0873 7 Social security 8 Allocated tips Sky DR D 20871 Sky DR D 20871 12a DD 12b G 12c 12c 12c 12d 12d 12d 12d 17 State income tax	Type 15-0873 7 Social security tips 8 Allocated tips Suffix Part of the property of the pro	798-15-0873 84920.89 7 7 7 7 7 7 7 7 7	798-15-0873 84920.89 7 Social security tips 3 Social security wages 110127.54 8 Allocated tips 5 Medicare wages and tips 110127.54 9 10 Dependent care benefits Sky DR D 20871 12a DD 23176.40 13 Statutory Employee 12b G 20500.00 Retirement Plan 12c Third-party sick pay 12d Third-party sick pay	798-15-0873 84920.89 7 Social security tips 3 Social security wages 110127.54 8 Allocated tips 5 Medicare wages and tips 110127.54 9 10 Dependent care benefits Sky DR D 20871 12a DD 23176.40 13 Statutory Employee 12b G 20500.00 Retirement Plan 12c Third-party sick pay over's State ID number 16 State wages, tips etc. 17 State income tax 18 Local wages, tips etc. 19 Local income tax	