b Employer's Identification number c Employer's name, address, and ZIP code	12a See instructions for Box 12	1 Wages, tips, other compensation 34000.00	2 Federal income tax withheld 3 0 8 2 . 8 4
SOURCE CONSULTING LLC	12b	3 Social security wages 3 4 0 0 0 . 0 0	4 Social security tax withheld 2108.00
4 WINDSONG WAY	\$ 12c	5 Medicare wages and tips	6 Medicare tax withheld
4 MINDSONG WAI	\$ 12d	34000.00 7 Social security tips	4 9 3 . 0 0 8 Allocated tips
HOPKINTON MA 01748 [e Employee's first name and initial Last name	1\$	9	10 Dependent care benefits
2535534	This information is being furnished to the Internal Revenue Service		
KARUNA SREE MATTA 13270 ALAMEDA TRACE CIRCLE, APT 732	Copy B To Be Filed with Employee's FEDERAL	11 Nonqualified plans 14 Other	Statutory Retirement Third-party employee plan sick pay
AUSTIN TX 78727	Tax Return a Employee's soc. sec. no		
f Employee's address and ZIP code 15 State	292 - 79 - 6923 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 V	Vith Employee's FEDERAL Tax Return
b Employer's Identification number c Employer's name, address, and ZIP code	12a See instructions for Box 12	1 Wages, tips, other compensation	l .
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13270 ALAMEDA TRACE CIRCLE, APT 732	Local Tax Departments	14 Other	
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AUSTIN TX 78727	a Employee's soc. sec. no 292 - 79 - 6923		
f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
Form W.2 Wago and Tay Statement	OMB # 1545-0008	Copy 2 To Be Filed With Employee's STA	TE CITY or LOCAL Tax Departments
Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service	OMB # 1343-0006	Copy 2 to be riled with Employee's 314	ire, erri, or Eocae rax bepartments
REV 01/03/23 OSP			
b Employer's Identification number c Employer's name, address, and ZIP code 20-2456070	12a See instructions for Box 12	1 Wages, tips, other compensation 34000.00	2 Federal income tax withheld 3082.84
SOURCE CONSULTING LLC	12b	3 Social security wages 34000.00	4 Social security tax withheld 2108.00
4 WINDSONG WAY	12c	5 Medicare wages and tips	6 Medicare tax withheld
	\$ 12d	34000.00 7 Social security tips	4 9 3 . 0 0 8 Allocated tips
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KARUNA SREE MATTA	Copy 2 for State, City, or Local Tax Departments	Trionqualities plans	13 Statutory Retirement Third-party employee plan sick pay
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f Employee's address and ZIP code	292-79-6923	40.11 in	20 Locality name
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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 STA	LATE, CITY, or LOCAL Tax Departments
b Employer's Identification number c Employer's name, address, and ZIP code 2 0 - 2456070	12a See instructions for Box 12	1 Wages, tips, other compensation 34000.00	2 Federal income tax withheld 3082.84
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T WINDOW WI	\$ 12d	34000.00 7 Social security tips	4 9 3 . 0 0 8 Allocated tips
HOPKINTON MA 01748 [e Employee's first name and initial Last name	\$ This information is being furnished to the	9	10 Dependent care benefits
2535534	Internal Revenue Service. If you are required to file a tax return, a negligence	44 Name life of plane	
KARUNA SREE MATTA	penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
13270 ALAMEDA TRACE CIRCLE, APT 732	Copy C for Employee's Records (see notice to	14 Other	
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Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008		Copy C For Employee's Records