© Employer's name, address, and ZIP code S9 TECHNOLOGIES INC	<b>1</b> Wgs, tips, other compn 58200.00	<b>2</b> Fed inc tax withheld 7464.00	3 Social security wages 58200.00	Form W-2
4640 VALAIS COURT	<b>4</b> SS tax withheld 3608.40	5 Medicare wages & tips 58200.00	6 Medicare tax withheld 843.90	Wage and
SUITE 205	7 Social security tips	8 Allocated tips	9	Tax
JOHNS CREEK GA 30022  d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	Statement
C Freelowsky same address and 7/D and	C.# 42	44	125	2022
<b>e</b> Employee's name, address, and ZIP code	Suff. 13 Statutory employee.	14 Other	12b 	
CHAITANYA ANCHA 2872 CROSS CREEK DRIVE	Button and also		12c	Copy B To Be Filed with Employee's FEDERAL
CUMMING GA 30040	Retirement plan		12d	Tax Return This information is being furnished to the Internal Revenue Service.
15 State Employer's state ID number 16 State wages, tip	Third-party sick pay s, etc 17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
	0.00 2863.56			-
REV 12/21/22 QBDT	I	I	I Depa	rtment of the Treasury — IRS
<b>a</b> Employee's SSN 205-15-1733	<b>b</b> Employer identification	number (EIN) 47-190	00517	OMB No. 1545-0008
Employer's name, address, and ZIP code     S9 TECHNOLOGIES INC	1 Wgs, tips, other compn 58200.00	<b>2</b> Fed inc tax withheld 7464.00	3 Social security wages 58200.00	Form W-2
	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
4640 VALAIS COURT SUITE 205	3608.40	58200.00	843.90	Tax
JOHNS CREEK GA 30022	7 Social security tips	8 Allocated tips	9	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2022
e Employee's name, address, and ZIP code	Suff. <b>13</b>	14 Other	12b	
   CHAITANYA ANCHA	Statutory employee		  12c	Copy 2 To Be Filed With
2872 CROSS CREEK DRIVE	Retirement plan			Employee's State, City, or Local
CUMMING GA 30040	Third-party sick pay		12d 	Income Tax Return.
15 State Employer's state ID No. 16 State wages, tip	s, etc 17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
GA 3154222-QL	0.00 2863.56			- +
REV 12/21/22 QBDT			•	
<b>a</b> Employee's SSN 205-15-1733	<b>b</b> Employer identification	number (FIN) 47-19(	00517	OMB No. 1545-0008
C Employer's name, address, and ZIP code  This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other capacity may be imposed on you if this income is taxable and you fail to report it.				
S9 TECHNOLOGIES INC	1 Wgs, tips, other compn	2 Fed inc tax withheld	3 Social security wages	Form W-2
4640 VALAIS COURT	58200.00 <b>4</b> SS tax withheld	7464.00 <b>5</b> Medicare wages & tips	58200.00 <b>6</b> Medicare tax withheld	-
SUITE 205	3608.40	58200.00	843.90	Wage and Tax
JOHNS CREEK GA 30022  d Control No.	7 Social security tips	8 Allocated tips	9	Statement
	10 Depdnt care benefits	11 Nonqualified plans	12a	2022
<b>e</b> Employee's name, address, and ZIP code	Suff. <b>13</b>	14 Other	12b	2022
CHAITANYA ANCHA	Statutory employee.		12c	Copy C For
2872 CROSS CREEK DRIVE	Retirement plan			EMPLOYEE'S RECORDS.
CUMMING GA 30040	Third-party sick pay		12d	(See Notice to Employee.)
15 State Employer's state ID No. 16 State wages, tip	s, etc 17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
GA  3154222-QL	0.00 2863.56		-	- +

**b** Employer identification number (EIN)

47-1900517

OMB No. 1545-0008

**a** Employee's SSN 205-15-1733