Copy BTo Be Filed With Emp	loyee's FEDERAL Tax Return	OMB No. 1545-0008	Copy 2To Be Filed With Empl	loyee's State, City,	OMB No. 1545-0008
This information is being funished to the a. Employee's social security number	-	2. Federal income tax withheld	or Local Income Tax Return a. Employee's social security number	Wages, tips, other compensation	2. Federal income tax withheld
719233470	16000.00	2314.66	719233470	16000.00	2314.66
b. Employer ID number (EIN)	3. Social security wages 16000.00	4. Social security tax withheld 992.00	b. Employer ID number (EIN)	3. Social security wages 16000.00	4. Social security tax withheld 992.00
81-1377709	5. Medicare wages and tips 16000.00	6. Medicare tax withheld 232.00	81-1377709	5. Medicare wages and tips 16000.00	6. Medicare tax withheld 232.00
c. Employer's name, address, an SOLWARE IT TECHNOLOG 8951 COLLIN MCKINNEY MCKINNEY, TX 75070	IES LLC		c. Employer's name, address, an SOLWARE IT TECHNOLOG 8951 COLLIN MCKINNEY MCKINNEY, TX 75070	IES LLC	
d. Control number			d. Control number	-	
e. Employee's name, address, ar Ashok kumar Upputu 2231 Live Oak st COMMERCE, TX 75428	ri		e. Employee's name, address, ar Ashok kumar Upputuri 2231 Live Oak st COMMERCE, TX 75428		
7. Social security tips	8. Allocated tips	9. Verification Code	7. Social security tips	8. Allocated tips	9. Verification Code
10. Dependent care benefits	11. Nonqualified plans	12a. Code See inst. for Box 12	10. Dependent care benefits	11. Nonqualified plans	12a. Code See inst. for Box 12
13. Statutory employee	14. Other	12b. Code	13. Statutory employee	14. Other	12b. Code
Retirement plan		12c. Code	Retirement plan		12c. Code
Third-party sick pay		12d. Code	Third-party sick pay		12d. Code
Form W-2 Wage and Tax State	9. Local income tax 20. Locailty no ment 2022 Department of		15. State Employer's state ID r 18. Local wages, tips, etc. 1 Form W-2 Wage and Tax State	19. Local income tax 20. Locality r	<u> </u>
Copy CFor EMPLOYEE'S RECORDS This information is being furnished to the Internal return, a negligence penalty or other sanction ma fail to report it.	S(See Notice to Employee.) Revenue Service. If you are fequired to file a tax y be imposed on you if this income is taxable and you	OMB No. 1545-0008	Copy 2To Be Filed With Empl or Local Income Tax Return	loyee's State, City,	OMB No. 1545-0008
a. Employee's social security number 719233470	1. Wages, tips, other compensation 16000.00	2. Federal income tax withheld 2314.66	a. Employee's social security number 719233470	1. Wages, tips, other compensation 16000.00	2. Federal income tax withheld 2314.66
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Retirement plan		12c. Code	Retirement plan		12c. Code
Third-party sick pay		12d. Code	Third-party sick pay		12d. Code
15. State Employer's state ID i	number 16. State wages, tip	s, 17.State income tax	15. State Employer's state ID r	number 16. State wages, tij	os, 17.State income tax
18. Local wages, tips, etc.	19. Local income tax 20. Locality na	ame	18. Local wages, tips, etc.	9. Local income tax 20. Locality r	name
Form W-2 Wage and Tax State	ment 2022 Departm	ent of the Treasury ~ Internal Revenue Service	Form W-2 Wage and Tax State	ment 2022 Depar	tment of the Treasury ~ Internal Revenue Servi