<b>a</b> Employee's SSN 744-61-1426	<b>b</b> Employer identification number (EIN) 27-3792382			OMB No. 1545-0008
<b>c</b> Employer's name, address, and ZIP code GM INFO TECH LLC	1 Wgs, tips, other compn 32000.00	2 Fed inc tax withheld	3 Social security wages 32000.00	Form <b>W-2</b>
1002 GEMINI AVE, SUITE 225-B	4 SS tax withheld 1984.00	5 Medicare wages & tips 32000.00	6 Medicare tax withheld 464.00	Wage and Tax
HOUSTON TX 77058	7 Social security tips	8 Allocated tips	9	Statement
d Control number	<b>10</b> Depdnt care benefits	11 Nonqualified plans	12a	2023
e Employee's name, address, and ZIP code Suff.	13 Statutory employee	14 Other	12b	
SHRAVYA PIDURU 743 BERKLEY PLAZA	Retirement plan		12c	Copy B To Be Filed with Employee's FEDERAL Tax Return
IRVING TX 75061	Third-party sick pay		12d	This information is being furnished to the Internal Revenue Service.
15 State Employer's state ID number 16 State wages, tips, etc 1	7 State income tax	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	20 Locality name
				1

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Department of the Treasury — IRS

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<b>a</b> Employee's SSN 744-61-1426	<b>b</b> Employer identification number (EIN) 27-3792382			OMB No. 1545-0008
<b>C</b> Employer's name, address, and ZIP code GM INFO TECH LLC	<b>1</b> Wgs, tips, other compn 32000.00	2 Fed inc tax withheld	3 Social security wages 32000.00	Form <b>W-2</b>
1002 GEMINI AVE, SUITE 225-B	4 SS tax withheld 1984.00	5 Medicare wages & tips 32000.00	6 Medicare tax withheld 464.00	Wage and Tax
HOUSTON TX 77058	7 Social security tips	8 Allocated tips	9	Statement
d Control number	<b>10</b> Depdnt care benefits	<b>11</b> Nonqualified plans	12a	2023
e Employee's name, address, and ZIP code Suff.	13 Statutory employee.	14 Other	12b	Copy 2 To Be
SHRAVYA PIDURU 743 BERKLEY PLAZA	Retirement plan		12c	Filed With Employee's State, City, or Local
IRVING TX 75061	Third-party sick pay		12d	Income Tax Return.
15 State Employer's state ID No. 16 State wages, tips, etc. 1          1	7 State income tax	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	<b>20</b> Locality name

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<b>a</b> Employee's SSN 744-61-1	426	<b>b</b> Employer identification number (EIN) 27-3792382			OMB No. 1545-0008
C Employer's name, address, and ZIP co	de	This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty			
GM INFO TECH LLC		other sanction may be imposed on you if this income is taxable and you fail to report it.   1 Was. tips. other compn 2 Fed inc tax withheld 3 Social security wages			
		1 Wgs, tips, other compn			Form <b>W-2</b>
1002 GEMINI AVE, SU	TTTT 225-B	32000.00	-	32000.00	
1002 GEMINI AVE, SC	TIE 220 D	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
		1984.00	32000.00	464.00	-
HOUSTON T2	x 77058	7 Social security tips	8 Allocated tips	9	Тах
d Control No.					Statement
		10 Depdnt care benefits	11 Nonqualified plans	12a	
					2023
e Employee's name, address, and ZIP c	ode Suff.	13	14 Other	12b	ZUZJ
· · · · · · · · · · · · · · · · · · ·		Statutory employee			
SHRAVYA PID	TDII	Statutory employee.		40-	Copy C For
	JRU			12c	EMPLOYEE'S
743 BERKLEY PLAZA		Retirement plan			RECORDS.
IRVING TX	K 75061	_		12d	(See Notice to
		Third-party sick pay			Employee.)
15 State Employer's state ID No.	16 State wages, tips, etc 1	7 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
	†				1

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