Copy B To Be Filed with Employee's   2023   OMB No. 1545-0008					Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.							
a Employee's SSN		es, tips, otl	ner comp. 81720.00		income tax withheld	a Emr	oloyee's SSN		es, tips, ot			l income tax withheld 10236.00
718-29-2503	3 Socia	al security		4 Social s	security tax withheld		-29-2503	3 Socia	al security		4 Social s	security tax withheld
<b>b</b> Employer ID no. (EIN)	(EIN) 81720.00 <b>5</b> Medicare wages and tips			5066.64  Medicare tax withheld		<b>b</b> Empl	<b>b</b> Employer ID no. (EIN)		81720.00		6 Medica	re tax withheld
86-1628308 81720.00					1184.94		1628308	<u> </u>		81720.00		1184.94
c Employer's name, address, and ZIP code PIONEER CONSULTING SERVICES INC							c Employer's name, address, and ZIP code PIONEER CONSULTING SERVICES INC					
44335 PREMIER PLZ STE 120					20147 5054	44335 PREMIER PLZ STE 120						
ASHBURN d Control number				VA	20147-5054		ASHBURN VA 201				20147-5054	
a control number						<b>u</b> 0011	aroi namboi					
e Employee's name, ac			de		Suff.	1 1 -	oloyee's name, a			de		Suff.
JAYANTH TEEGALA						JAYANTH TEEGALA 215 EAGLESON ST						
DURHAM	215 EAGLESON ST DURHAM			NC 27703			DURHAM				NC 27703	
7 Social security tips		8 Allocate	d tips	9		7 Soci	al security tips		8 Allocate	ed tips	9	
Dependent care benefits     11 Nonqualified plans		12a Code See inst. for box 12		1000	10 Dependent care benefits		efits 11 Nonqualified plans		40- 0	ode See inst. for box 12		
11 Nonqualified plans		12a Code See Ilist. for box 12		II Dep	Dependent care benefits		11 Nonqualified plans		12a C	ode See Inst. for box 12		
13	<b>14</b> Oth	ner		<b>12b</b> Co	ode	13		<b>14</b> Ot	her		<b>12b</b> Co	ode
Statutory employee			12c Code		Statutory	Statutory employee				<b>12c</b> Co	ode	
Retirement Plan			<b>12d</b> Code		Retireme	Retirement Plan				<b>12d</b> Code		
Third-party sick pay				120 00	ode	Third-pa	rty sick pay				120 00	ode
NC 6014819	959		8172	0.00	3348.00	NC	6014819	959		8172	0.00	3348.00
15 State Employer's st	toto ID ni	umbor	16 State wages, tips	o oto	17 State income tax	4E State	I Employer's state	to ID nur	mbor	16 State wages, tip	o oto	17 State income tax
18 Local wages, tips, etc		19 Local ir	0 , 1		lity name		al wages, tips, et		19 Local in		20 Locality	
Local wages, tips, etc	·.	LUCAI II	icome tax	20 LUCA	mry name	10 100	ai wayes, lips, el		LUCAI II	ICOING LAX	LUCAIII)	riane
Form W-2 Wage and Ta This information is being furni	x Statem ished to the	ent Internal Re	venue Service.	ı	Dept. of the Treasury - IF	S Form V	V-2 Wage and Ta	ax Staten	nent			Dept. of the Treasury - IRS

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Conv. C. For FMPLOYEE'S RECORDS

2023

Copy C For EM	202	2023						
(See Notice to E		OMB No. 1545-0008						
a Employee's SSN	1 Wag	jes, tips, ot		2 Federal income tax withheld				
710 00 0500			81720.00	10236.00				
718-29-2503	3 Social security wages			4 Social security tax withheld				
<b>b</b> Employer ID no. (EIN)			81720.00	5066.64				
86-1628308	5 Med	icare wage	•	6 Medicare tax withheld				
			81720.00	1184.94				
c Employer's name, address, and ZIP code PIONEER CONSULTING SERVICES INC 44335 PREMIER PLZ STE 120								
ASHBURN				VA	20147-5054			
d Control number								
e Employee's name, address, and ZIP code JAYANTH TEEGALA 215 EAGLESON ST								
DURHAM NC 27703								
7 Social security tips		8 Allocate	ed tips	9				
10 Dependent care bene	efits	11 Nonqua	alified plans	12a Code See inst. for box 12				
13	<b>14</b> Ot	Other			12b Code			
Statutory employee				12c C	12c Code			
Retirement Plan				120 00				
				<b>12d</b> Cd	12d Code			
Third-party sick pay			ı		Γ			
NC   6014819	959		8172	20.00	0.00 3348.00			
15 State Employer's sta	te ID nur	mber	16 State wages, tip	es, tips, etc. 17 State income tax				
18 Local wages, tips, et	c.	19 Local in	ncome tax	20 Locality name				

REV 12/19/23 QBDT

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. 2023 OMB No. 1545-0008									
1					2 Federal income tax withheld				
a Employee's SSN	81720.00			10236.00					
718-29-2503	3 Social so	cial security wages			4 Social security tax withheld				
710-29-2303	3 Ouciai se	, 0			·				
<b>b</b> Employer ID no. (EIN)		81720.00			5066.64				
	5 Medicare wages and tips			6 Medicare tax withheld					
86-1628308		81720.00			1184.94				
c Employer's name, address, and ZIP code PIONEER CONSULTING SERVICES INC 44335 PREMIER PLZ									
STE 120 ASHBURN	20147-5054								
d Control number									
e Employee's name, address, and ZIP code Suff.  JAYANTH TEEGALA  215 EAGLESON ST									
DURHAM				NC	27703				
7 Social security tips	<b>8</b> A	8 Allocated tips							
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13	13 14 Other								
Statutory employee					40 - O - I -				
Detice and Disc					12c Code				
Retirement Plan	Retirement Plan								
Third-party sick pay									
NC 6014819		81720		3348.00					
15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax									
18 Local wages, tips, etc	. 19 L	19 Local income tax			20 Locality name				
Form W-2 Wage and Tax Statement Dept. of the Treasury - If									