

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 DIGITAL INTELLIGENCE SYSTEMS  
 8270 GREENSBORO DRIVE  
 SUITE 1000  
 MCLEAN VA 22102

**e** Employee's name, address, and ZIP code  
 Suff. RAJA RAJESWARI KARETI  
 2347, APT C, SALEM CT,  
 WINSTON SALEM NC 27103

7 Social security tips	1 Wages, tips, other comp. 63715.30	2 Federal income tax withheld 9610.72
8 Allocated tips	3 Social security wages 63715.30	4 Social security tax withheld 3950.35
9	5 Medicare wages and tips 63715.30	6 Medicare tax withheld 923.87
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b
b Employer identification number (EIN) 45-5636447		12c
a Employee's social security no. 825-82-5913		12d

15 State NC	Employer's state ID no. 600901410	16 State wages, tips, etc. 63715.30	17 State income tax 2736.00	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS Web Site at [www.irs.gov/efile](http://www.irs.gov/efile)

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.

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**Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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