PAGE 1

| Employee Re  | ference Copy  |  |  |  |
|--|---|--|--|--|
| W-2 Wage a   | and Tax <b>DADD</b>   |  |  |  |
| VV-Z Statem  |   |  |  |  |
| • •••••  | OMB No. 1545-0008   |  |  |  |
| Copy C for employee's records.<br>d Control number Dept. | Corp. Employer use only   |  |  |  |
| 000103 K9/EPI  | A 37  |  |  |  |
|  |   |  |  |  |
| c Employer's name, address, a                            |   |  |  |  |
| SUNRAISE TEC   | HNOLOGIES   |  |  |  |
| INC  |   |  |  |  |
| 9516 A LEE H\  | NY  |  |  |  |
| FAIRFAX, VA 2  | 2031  |  |  |  |
|  |   |  |  |  |
|  | Batch #92063  |  |  |  |
|  |   |  |  |  |
| e/f Employee's name, address, a                          | and ZIP code  |  |  |  |
| MITTA VENKATA SU   | MANTH KUMA  |  |  |  |
| 10155 MEETING HOL  | -   |  |  |  |
|  |   |  |  |  |
| HUNTERVILLE, NC 2  | 8078  |  |  |  |
|  |   |  |  |  |
| b Employer's FED ID number                               | a Employee's SSA number   |  |  |  |
| 82-1026416   | XXX-XX-3081   |  |  |  |
| 1 Wages, tips, other comp.                               | <sup>2</sup> Federal income tax withheld  |  |  |  |
| 159310.27  | 15987.69  |  |  |  |
| 3 Social security wages                                  | 4 Social security tax withheld  |  |  |  |
| 159310.27  | 9877.24   |  |  |  |
| 5 Medicare wages and tips                                | 6 Medicare tax withheld   |  |  |  |
| 159310.27  | 2310.00   |  |  |  |
| 7 Social security tips                                   | 8 Allocated tips  |  |  |  |
| 2  |   |  |  |  |
| 9  | 10 Dependent care benefits  |  |  |  |
|  | 12a See instructions for box 12   |  |  |  |
| 11 Nonqualified plans                                    | 12a See Instructions for box 12   |  |  |  |
|  | 12b   |  |  |  |
| 14 Other<br>13937.73 SEC125                              | 12c   |  |  |  |
| 13937.73 SEC125  |   |  |  |  |
|  | 12d   |  |  |  |
|  |   |  |  |  |
| 45 State Employor's state ID as                          | 13 Stat emp Ret. plan 3rd party sick pa   |  |  |  |
| 15 State Employer's state ID no                          | 13 Stat emp Ret. plan 3rd party sick pa   |  |  |  |
| TOTAL STATE  | 13 Stat emp Ret. plan 3rd party sick party si |  |  |  |
| TOTAL STATE  | 13 Stat emp Ret. plan 3rd party sick pa   |  |  |  |
| TOTAL STATE  | 13 Stat emp Ret. plan 3rd party sick party si |  |  |  |

## 2023 W-2 and EARNINGS SUMMARY



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

## 1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

|                     | Wages, Tips, other<br>Compensation<br>Box 1 of W-2 | Social Security<br>Wages<br>Box 3 of W-2 | Medicare<br>Wages<br>Box 5 of W-2 | NC. State Wages,<br>Tips, Etc.<br>Box 16 of W-2 |
|---------------------|--|--|-----------------------------------|---|
| Gross Pay           | 173,248.00   | 173,248.00                               | 173,248.00                        | 147,648.00                                      |
| Less Other Cafe 125 | 13,937.73  | 13,937.73                                | 13,937.73                         | 13,652.13                                       |
| Reported W-2 Wages  | 159,310.27   | 159,310.27                               | 159,310.27                        | 133,995.87                                      |

2. Employee Name and Address.

## MITTA VENKATA SUMANTH KUMA 10155 MEETING HOUSE DR NW HUNTERVILLE, NC 28078

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|  |   |   |   |  | 1   |
|--|---|---|---|--|---|
| 1 Wages, tips, other comp.<br>159310.27  | 2 Federal income tax withheld<br>15987.69 | 1 Wages, tips, other comp.<br>159310.27   | 2 Federal income tax withheld<br>15987.69 | 1 Wages, tips, other comp.<br>159310.27          | 2 Federal income tax withheld 15987.69    |
| 3 Social security wages<br>159310.27   | 4 Social security tax withheld<br>9877.24 | 3 Social security wages<br>159310.27  | 4 Social security tax withheld<br>9877.24 | <sup>3</sup> Social security wages<br>159310.27  | 4 Social security tax withheld<br>9877.24 |
| 5 Medicare wages and tips<br>159310.27   | 6 Medicare tax withheld 2310.00           | 5 Medicare wages and tips<br>159310.27  | 6 Medicare tax withheld 2310.00           | 5 Medicare wages and tips<br>159310.27           | 6 Medicare tax withheld<br>2310.00        |
| d Control number Dept.   | Corp. Employer use only                   | d Control number Dept.  | Corp. Employer use only                   | d Control number Dept.                           | Corp. Employer use only                   |
| 000103 K9/EPI  | A 37                                      | 000103 K9/EPI   | A 37                                      | 000103 K9/EPI                                    | A 37                                      |
| c Employer's name, address, a  | nd ZIP code                               | c Employer's name, address, and ZIP code  |   | c Employer's name, address, and ZIP code         |   |
| SUNRAISE TECHNOLOGIES SUNRAISE TECHNOLOGIES  |   | SUNRAISE TECHNOLOGIES   |   |  |   |
| 9516 A LEE HW  |   | 9516 A LEE HW   |   | 9516 A LEE HWY                                   |   |
| FAIRFAX, VA 22   |   | FAIRFAX, VA 22  |   | FAIRFAX, VA 22                                   |   |
| b Employer's FED ID number<br>82-1026416   | a Employee's SSA number<br>XXX-XX-3081    | b Employer's FED ID number<br>82-1026416  | a Employee's SSA number<br>XXX-XX-3081    | b Employer's FED ID number<br>82-1026416         | a Employee's SSA number<br>XXX-XX-3081    |
| 7 Social security tips   | 8 Allocated tips                          | 7 Social security tips  | 8 Allocated tips                          | 7 Social security tips                           | 8 Allocated tips                          |
| 9  | 10 Dependent care benefits                | 9 10 Dependent care benefits  |   | 9 10 Dependent care benefits                     |   |
| 11 Nonqualified plans  | 12a See instructions for box 12           | 11 Nonqualified plans   | 12a                                       | 11 Nonqualified plans                            | 12a                                       |
| 14 Other   | 12b                                       | 14 Other  | 12b                                       | 14 Other   | 12b                                       |
| 13937.73 SEC125  | 12c                                       | 13937.73 SEC125   | 12c                                       | 13937.73 SEC125                                  | 12c                                       |
| 13937.73 SEC123  | 12d                                       | 13937.73 SEC123   | 12d                                       | 13937.73 SEC125                                  | 12d                                       |
|  | 13 Stat emp. Ret. plan 3rd party sick pay |   | 13 Stat emp. Ret. plan 3rd party sick pay |  | 13 Stat emp. Ret. plan 3rd party sick pay |
| e/f Employee's name, address an  | d ZIP code                                | e/f Employee's name, address and ZIP code   |   | e/f Employee's name, address and ZIP code        |   |
| MITTA VENKATA SU   | MANTH KUMA                                | MITTA VENKATA SU  | MANTH KUMA                                | MITTA VENKATA SUMANTH KUMA                       |   |
|  |   |   | 10155 MEETING HOUSE DR NW                 |  |   |
|  |   |   | HUNTERVILLE. NC 28078                     |  |   |
|  |   |   |   |  |   |
| 15 State Employer's state ID no.<br>TOTAL STATE  | 16 State wages, tips, etc.                | 15 State Employer's state ID no.<br>NC 601270785  | 16 State wages, tips, etc.<br>133995.87   | 15 State Employer's state ID no.<br>NC 601270785 | . 16 State wages, tips, etc.<br>133995.87 |
| 17 State income tax<br>7267.00   | 18 Local wages, tips, etc.                | <sup>17</sup> State income tax <b>5931.00</b>   | 18 Local wages, tips, etc.                | 17 State income tax 5931.00                      | 18 Local wages, tips, etc.                |
| 19 Local income tax  | 20 Locality name                          | 19 Local income tax   | 20 Locality name                          | 19 Local income tax                              | 20 Locality name                          |
| Federal Fil  | ing Copy                                  | NC.State Re   | eference Copy                             | NC.State Fil                                     | ing Copy                                  |
| W-2 Wage and Tax 2023<br>Statement Copy B to be filed with employee's Federal Income Tax Return.<br>Wage and Tax 2023<br>Copy 2 to be filed with employee's State Income Tax Return.<br>NO. Otate Reference Copy<br>Wage and Tax 2023<br>Statement Copy 2 to be filed with employee's State Income Tax Return. |   | Wage and Tax 2023<br>Statement<br>Copy 2 to be filed with employee's State Income Tax Return. No. 1545-0008 |   |  |   |