<b>a</b> Employee's SSN 308-47-6057		<b>b</b> Employer identification n	<b>b</b> Employer identification number (EIN) 83-2185245		
C Employer's name, address, and ZIP code AI9 SOLUTIONS INC		<b>1</b> Wgs, tips, other compn 57912.00	<b>2</b> Fed inc tax withheld 6955.00	3 Social security wages	Form W-2
3810 WINDERMERE PKWY		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
STE 503 CUMMING GA 30041		7 Social security tips	8 Allocated tips	9	Tax Statement
d Control number	30011	10 Depdnt care benefits	11 Nonqualified plans	12a	•
e Employee's name, address, and ZIP code	s Suff.	13	14 Other	12b	2023
KARTHIK GADE		Statutory employee		  12c	Copy B To Be Filed with
10651 STEPPINGTON DR		Retirement plan			Copy B To Be Filed with Employee's FEDERAL Tax Return This information is being furnished to the Internal
	75230	Third-party sick pay		12d 	Revenue Service.
15 State Employer's state ID number	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
REV 11/30/23 QBDT					rtment of the Treasury — IRS
<b>a</b> Employee's SSN 308-47-605	57	<b>b</b> Employer identification r	number (FIN) 83-218	35245	OMB No. 1545-0008
C Employer's name, address, and ZIP code		1 Wgs, tips, other compn	2 Fed inc tax withheld	3 Social security wages	
AI9 SOLUTIONS INC		57912.00	6955.00	, ,	Form <b>W-2</b>
3810 WINDERMERE PKWY		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and Tax
	30041	7 Social security tips	8 Allocated tips	9	Statement
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a	2023
e Employee's name, address, and ZIP code Suff.		13	14 Other	12b	
KARTHIK GADE		Statutory employee		12c	Copy 2 To Be Filed With
10651 STEPPINGTON DR APT 1040		Retirement plan			Employee's State, City, or Local
DALLAS TX	75230	Third-party sick pay		12d 	Income Tax Return.
15 State Employer's state ID No.	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
					- †
REV 11/30/23 QBDT				•	
<b>a</b> Employee's SSN 308-47-605	57	<b>b</b> Employer identification r	number (EIN) 83-218	35245	OMB No. 1545-0008
C Employer's name, address, and ZIP code		This information is being furnished to the IRS. 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.			
AI9 SOLUTIONS INC		1 Wgs, tips, other compn 57912.00	<b>2</b> Fed inc tax withheld 6955.00	3 Social security wages	Form <b>W-2</b>
3810 WINDERMERE PKWY STE 503		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
	30041	7 Social security tips	8 Allocated tips	9	Tax Statement
d Control No.		10 Depdnt care benefits	11 Nonqualified plans	12a	1
e Employee's name, address, and ZIP code	e Suff.	13	14 Other	12b	2023
			I .	I I	I
KARTHIK GADE		Statutory employee		12c	Copy C For
10651 STEPPINGTON DR		Retirement plan			EMPLOYEE'S RECORDS.
				12d	EMPLOYEE'S RECORDS. (See Notice to Employee.)
10651 STEPPINGTON DR DALLAS TX	75230	Retirement plan	18 Local wages, tips, etc		EMPLOYEE'S RECORDS. (See Notice to