b Employer's Identification number 26 - 0570838	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Endoral income tax withhold
b Employer's Identification number c Employer's name, address, and ZIP code	\$	88000.00	12265.44
VISIO SYSTEMS INC	12b	3 Social security wages	4 Social security tax withheld
VIBIO BIBILIND INC	 \$	88000.00	5456.00
1553 STATE ROUTE 27, SUITE 1400	12c	5 Medicare wages and tips	6 Medicare tax withheld
1333 811111 100011 277 801111 1100	\$ 12d	88000.00 7 Social security tips	1276.00 8 Allocated tips
SOMERSET NJ 08873	1\$	7 Social Security tips	6 Allocated tips
e Employee's first name and initial Last name		9	10 Dependent care benefits
16579803	This information is being furnished to the Internal Revenue Service		
SAI JASWANTH KUTUMBAKA		11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
686 CYPRESS DOWN LN	Copy B To Be Filed with		
OOO CIIRDD DOWN DIV	Employee's FEDERAL	14 Other	
COLLIERVILLE TN 38017	Tax Return		
COULTERVILLE IN 36017	a Employee's soc. sec. no		
f Employee's address and ZIP code	784-32-1105		
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
Form W-2 Wage and Tax Statement 2023 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	Vith Employee's FEDERAL Tax Return
2023			
b Employer's Identification number c Employer's name, address, and ZIP code 26 - 0570838	12a See instructions for Box 12	1 Wages, tips, other compensation	
	\$ 12b	88000.00 3 Social security wages	12265.44
VISIO SYSTEMS INC	120	88000.00	5456.00
	12c	5 Medicare wages and tips	6 Medicare tax withheld
1553 STATE ROUTE 27, SUITE 1400	\$	88000.00	1276.00
	12d	7 Social security tips	8 Allocated tips
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e Employee's first name and initial Last name		9	10 Dependent care benefits
16579803		11 Nonqualified plans	12 0
SAI JASWANTH KUTUMBAKA	Copy 2 for State, City, or	Tr Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
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		14 Other	
COLLIERVILLE TN 38017			
	a Employee's soc. sec. no		
f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	784-32-1105 18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Form W-2 Wage and Tax Statement O O O Department of the Treasury-Internal Revenue Service			ATE, CITY, or LOCAL Tax Department
Form W-2 Wage and Tax Statement 2023 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 to be Flied with Employee's 317	,,
2023	ONIB # 1343-0008	Copy 2 to be Filed With Employee's 317	,
REV 12/24/23 OSP			
REV 12/24/23 OSP		1 Wages, tips, other compensation	2 Federal income tax withheld
REV 12/24/23 OSP b Employer's Identification number c Employer's name, address, and ZIP code	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00	2 Federal income tax withheld 12265.44
REV 12/24/23 OSP	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages	2 Federal income tax withheld 12265.44 4 Social security tax withheld
REV 12/24/23 OSP b Employer's Identification number c Employer's name, address, and ZIP code VISIO SYSTEMS INC	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00	2 Federal income tax withheld 12265.44
REV 12/24/23 OSP b Employer's Identification number c Employer's name, address, and ZIP code	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00 6 Medicare tax withheld
DEMPLOYER'S Identification number CEMPLOYER'S name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00
DEMPLOYER'S Identification number CEMPLOYER'S name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00 6 Medicare tax withheld 1276.00 8 Allocated tips
DEMPLOYER'S Identification number CEMPLOYER'S INCUSTOR SYSTEMS INCUSTOR STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 DEMPLOYER'S INCUSTOR	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00 6 Medicare tax withheld 1276.00
b Employer's Identification number c Employer's name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 [e Employee's first name and initial Last name 16579803	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips 88000.00 7 Social security tips	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00 6 Medicare tax withheld 1276.00 8 Allocated tips
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b Employer's Identification number c Employer's name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 [e Employee's first name and initial Last name 16579803	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips 88000.00 7 Social security tips	2 Federal income tax withheld
b Employer's Identification number c Employer's name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 [e Employee's first name and initial Last name 16579803 SAI JASWANTH KUTUMBAKA	12a See instructions for Box 12 \$ 12b \$ 12c \$ \$ 12d \$ \$ Copy 2 for State, City, or	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips 88000.00 7 Social security tips	2 Federal income tax withheld
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DEMPLOYER'S Identification number CEMPLOYER'S name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 DEMPLOYER'S first name and initial Last name 16579803 SAI JASWANTH KUTUMBAKA 686 CYPRESS DOWN LN COLLIERVILLE TN 38017	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips 88000.00 7 Social security tips	2 Federal income tax withheld
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DEMPLOYER'S Identification number CEMPLOYER'S name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 DEMPLOYER'S first name and initial Last name 16579803 SAI JASWANTH KUTUMBAKA 686 CYPRESS DOWN LN COLLIERVILLE TN 38017	12a See instructions for Box 12	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips 88000.00 7 Social security tips	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00 6 Medicare tax withheld 1276.00 8 Allocated tips 10 Dependent care benefits 13 Statutory Plan Sick pay
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b Employer's Identification number c Employer's name, address, and ZIP code VISIO SYSTEMS INC 1553 STATE ROUTE 27, SUITE 1400 SOMERSET NJ 08873 Employee's first name and initial Last name 16579803 SAI JASWANTH KUTUMBAKA 686 CYPRESS DOWN LN COLLIERVILLE TN 38017 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax Form W-2 Wage and Tax Statement 2023 Department of the Treasury-Internal Revenue Service	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1 Wages, tips, other compensation 88000.00 3 Social security wages 88000.00 5 Medicare wages and tips 88000.00 7 Social security tips 9 11 Nonqualified plans 14 Other 19 Local income tax	2 Federal income tax withheld 12265.44 4 Social security tax withheld 5456.00 6 Medicare tax withheld 1276.00 8 Allocated tips 10 Dependent care benefits 13 Statutory employee Plan Third-party sick pay 10 Locality name 20 Locality name 21 Federal income tax withheld 12265.44
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