Copy B - For Employee's Federal Income Tax Return					2023 OMB No. 1545-0008			
a Employee's social security number			717.97	2 Federa	al income tax withheld 8270.67			
190 - 97 - 7391 Employer ID number	3 Socia	l security wa 113	ges 234.00	4 Social	4 Social security tax withheld 7020.52			
98-0561217	5 Medio	5 Medicare wages and tips 113234.00			6 Medicare tax withheld 1641.88			
Employer's name, address, Hughes Systic 15245 Shady G Ste 405 Rockville, MD	ue Pr rove	ivate Rd	Limited					
Control number 137404 E00777								
Surya Prakash 19308 Circle APT 201 Germantown, M	Gate ID 208	Drive		9 Adv	ance EIC payment			
Dependent care benefits	11	Nonqualified	1 plane					
		Tionqualific						
^{2a} D	351	6.03	13 Statutory em	ployee R	Retirement plan 3rd-party sick pay			
2c DD 2d	359	5.00	14 Other					
N/A			N/A		N/A			
5 State Employer's State ID#		16 State wages, tips, etc.			17 State income tax			
18 Local wages, tips, etc. N/A		19 Local income tax N/A		20 Lo	20 Locality name N/A			

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service

Copy 2 - For Employee's State Income Tax Return [MD] 2023 OMB No. 1545-0008							
a Employee's social security number	1 Wage	es, tips, other 1097	comp. 717.97	2 Federal income tax withheld 8270.67			
190 - 97 - 7391 b Employer ID number	3 Social security was 1132		234.00	4 Social :	security tax withhe	eld 20.52	
98-0561217	1	are wages and tips 113234.00		6 Medicare tax withheld 1641.88			
c Employer's name, address, a Hughes Systiqu 15245 Shady Gr Ste 405 Rockville, MD	ne Prove 2085	ivate 1 Rd 0	Limited				
Surya Prakash 19308 Circle (APT 201 Germantown, MI	ate	Drive					
7 Social security tips	8 /	Allocated tips		9 Advance EIC payment			
10 Dependent care benefits 11		Nonqualified	,				
12a D		6.03	13 Statutory employee Retirement plan 3rd-party sick pay X				
12c DD 12d	359	95.00	14 Other				
MD 16132292	16132292		109717.97		8137.09		
15 State Employer's State ID# 18 Local wages, tips, etc.		16 State wages, tips, etc. 19 Local income tax			17 State income tax 20 Locality name		
N/A		N/A			N/A		

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

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Copy C -	FOR EMPL	OYE	EE'S RE	CORDS ONL	_Y	2023	OMB No. 1545-0008		
security number			109717.97			2 Federal income tax withheld 8270.67			
		3 Socia			4 Social security tax withheld				
b Employer ID number 98-0561217		113234.00			7020.52				
		5 Medicare wages and tips 113234.00			6 Medicare tax withheld 1641.88				
Hughes 15245 S Ste 405	me, address, and Systique Shady Gro 5 lle, MD 2	e Pr ove	ivate I Rd	Limited					
d Control number 137404	er E00777								
Surya I 19308 (APT 201	ame, address, and Prakash S Circle Ga l Lown, MD	Sing ate	h Drive						
7 Social security	ocial security tips 8		Allocated tips			9 Advance EIC payment			
10 Dependent care benefits 1		11	1 Nonqualified plans						
12a D		3516.03		13 Statutory employee Retirement plan 3rd-party s X			3rd-party sick pa	ıy	
12b DD		3595.00		14 Other				_	
12c									
12d									
MD 161	32292	1		09717.97			8137.09		
15 State Employer's State ID#			16 State wages, tips, etc.		17 State income tax				
18 Local wages, tips, etc.		19 Local income tax		20 Locality name					
N/A		N/A			N/A				

Form W-2 Wage and Tax Statement

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