

<b>b Employer's Identification number</b>		84-2399638		<b>12a See instructions for Box 12</b>		<b>1 Wages, tips, other compensation</b>		<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>		PARVATHI GANDURI LLC		12b		\$ 48000.00		2030.04	
6315 BRIDGEVISTA DR		LITHIA FL 33547		12c		\$ 48000.00		2976.00	
<b>e Employee's first name and initial</b>		<b>Last name</b>		12d		\$ 48000.00		<b>6 Medicare tax withheld</b>	
14488177				12d		\$		<b>7 Social security tips</b>	
PARVATHI GANDURI		6315 BRIDGEVISTA DR		12d		\$		<b>8 Allocated tips</b>	
LITHIA FL 33547				12d		\$		<b>9</b>	
<b>f Employee's address and ZIP code</b>				<b>a Employee's soc. sec. no</b>		469-41-5920		<b>10 Dependent care benefits</b>	
15 State		Employer's state I.D. No.		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
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Form W-2 Wage and Tax Statement 2023 Department of the Treasury-Internal Revenue Service OMB # 1545-0008

<b>b Employer's Identification number</b>				<b>12a See instructions for Box 12</b>		<b>1 Wages, tips, other compensation</b>		<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>				12b		\$		<b>3 Social security wages</b>	
				12c		\$		<b>4 Social security tax withheld</b>	
<b>e Employee's first name and initial</b>		<b>Last name</b>		12d		\$		<b>5 Medicare wages and tips</b>	
				12d		\$		<b>6 Medicare tax withheld</b>	
				12d		\$		<b>7 Social security tips</b>	
				12d		\$		<b>8 Allocated tips</b>	
<b>f Employee's address and ZIP code</b>				<b>a Employee's soc. sec. no</b>				<b>9</b>	
15 State		Employer's state I.D. No.		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
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---		---		---		---		20 Locality name	
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Form W-2 Wage and Tax Statement Department of the Treasury-Internal Revenue Service OMB # 1545-0008

REV 12/24/23 OSP

<b>b Employer's Identification number</b>				<b>12a See instructions for Box 12</b>		<b>1 Wages, tips, other compensation</b>		<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>				12b		\$		<b>3 Social security wages</b>	
				12c		\$		<b>4 Social security tax withheld</b>	
<b>e Employee's first name and initial</b>		<b>Last name</b>		12d		\$		<b>5 Medicare wages and tips</b>	
				12d		\$		<b>6 Medicare tax withheld</b>	
				12d		\$		<b>7 Social security tips</b>	
				12d		\$		<b>8 Allocated tips</b>	
<b>f Employee's address and ZIP code</b>				<b>a Employee's soc. sec. no</b>				<b>9</b>	
15 State		Employer's state I.D. No.		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
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Form W-2 Wage and Tax Statement Department of the Treasury-Internal Revenue Service OMB # 1545-0008

<b>b Employer's Identification number</b>				<b>12a See instructions for Box 12</b>		<b>1 Wages, tips, other compensation</b>		<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>				12b		\$		<b>3 Social security wages</b>	
				12c		\$		<b>4 Social security tax withheld</b>	
<b>e Employee's first name and initial</b>		<b>Last name</b>		12d		\$		<b>5 Medicare wages and tips</b>	
				12d		\$		<b>6 Medicare tax withheld</b>	
				12d		\$		<b>7 Social security tips</b>	
				12d		\$		<b>8 Allocated tips</b>	
<b>f Employee's address and ZIP code</b>				<b>a Employee's soc. sec. no</b>				<b>9</b>	
15 State		Employer's state I.D. No.		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
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