C Employer's name, address, and ZIP code AI9 SOLUTIONS INC 2 Fed inc tax withheld 75360 00 777 11 75360 00	
A19 SOLUTIONS INC 75360.00 9077.11 75360.00	Form W-2
4 SS tax withheld 5 Medicare wages & tips 6 Medicare tax withheld 3810 WINDERMERE PKWY 4672.32 75360.00 1092.72	Wage and Tax
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d Control number 10 Depont care benefits 11 Nonqualified plans 12a	
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e Employee's name, address, and ZIP code Suff. 13 Statutory employee. 14 Other 12b	
MAHESWARI KUNAPAREDDY 12c	opy B To Be Filed with mployee's FEDERAL
Retirement plan	ax Return his information is being
	urnished to the Internal 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 Departm	ent of the Treasury — IRS
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a Employee's SSN 741-61-7219 b Employer identification number (EIN) 83-2185245 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 negli	OMB No. 1545-0008
AT9 SOLUTTONS TNC other sanction may be imposed on you if this income is taxable and you fail to report it.	
1 Wgs, tips, other compn 2 Fed inc tax withheld 3 Social security wages 75360.00 9077.11 75360.00	Form W-2
STE 503 4672.32 75360.00 1092.72	Wage and
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Statutory employee.	
MAHESWARI KUNAPAREDDY 1290 HIDDEN RIDGE Retirement plan	Copy C For EMPLOYEE'S RECORDS.
IRVING TX 75038 Third-party sick pay	(See Notice to Employee.)
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