

a Employee's SSN 741-61-7219		b Employer identification number (EIN) 83-2185245			OMB No. 1545-0008	
c Employer's name, address, and ZIP code AI9 SOLUTIONS INC 3810 WINDERMERE PKWY STE 503 CUMMING GA 30041		1 Wgs, tips, other compn 75360.00	2 Fed inc tax withheld 9077.11	3 Social security wages 75360.00		
		4 SS tax withheld 4672.32	5 Medicare wages & tips 75360.00	6 Medicare tax withheld 1092.72		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans		12a	
e Employee's name, address, and ZIP code Suff. MAHESWARI KUNAPAREDDY 1290 HIDDEN RIDGE IRVING TX 75038		13 Statutory employee <input type="checkbox"/>	14 Other		12b	
		Retirement plan <input type="checkbox"/>			12c	
		Third-party sick pay <input type="checkbox"/>			12d	
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

Form **W-2**
Wage and Tax Statement
2023

Copy B To Be Filed with Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.

REV 11/30/23 QBDT

Department of the Treasury — IRS

a Employee's SSN 741-61-7219		b Employer identification number (EIN) 83-2185245			OMB No. 1545-0008	
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e Employee's name, address, and ZIP code Suff. MAHESWARI KUNAPAREDDY 1290 HIDDEN RIDGE IRVING TX 75038		13 Statutory employee <input type="checkbox"/>	14 Other		12b	
		Retirement plan <input type="checkbox"/>			12c	
		Third-party sick pay <input type="checkbox"/>			12d	
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

Form **W-2**
Wage and Tax Statement
2023

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

REV 11/30/23 QBDT

a Employee's SSN 741-61-7219		b Employer identification number (EIN) 83-2185245			OMB No. 1545-0008	
c Employer's name, address, and ZIP code AI9 SOLUTIONS INC 3810 WINDERMERE PKWY STE 503 CUMMING GA 30041		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.				
		1 Wgs, tips, other compn 75360.00	2 Fed inc tax withheld 9077.11	3 Social security wages 75360.00		
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d Control No.		7 Social security tips	8 Allocated tips	9		
e Employee's name, address, and ZIP code Suff. MAHESWARI KUNAPAREDDY 1290 HIDDEN RIDGE IRVING TX 75038		10 Depdnt care benefits	11 Nonqualified plans		12a	
		13 Statutory employee <input type="checkbox"/>	14 Other		12b	
		Retirement plan <input type="checkbox"/>			12c	
Third-party sick pay <input type="checkbox"/>	12d					
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Form **W-2**
Wage and Tax Statement
2023

Copy C For EMPLOYEE'S RECORDS.
(See Notice to Employee.)

REV 11/30/23 QBDT