

| Copy B-To Be Filed With Employee's Federal Tax Return. | | | 41-0852411 OMB No. 1545-0008 | | |
|---|--|--|---|---------------------|--|
| a Employee's soc. sec. no. XXX-XX-2261 | | 1 Wages, tips, other comp. 52608.00 | 2 Federal income tax withheld 6518.21 | | |
| b Employer ID number (EIN) 84-4051565 | | 3 Social security wages 52608.00 | 4 Social security tax withheld 3261.70 | | |
| | | 5 Medicare wages and tips 52608.00 | 6 Medicare tax withheld 762.82 | | |
| c Employer's name, address, and ZIP code SANAV TECHNOLOGIES LLC 2967 100TH ST #7 URBANDALE IA 50322 | | | | | |
| d Control number 9 | | | | | |
| e Employee's name, address, and ZIP code Suff. RAVITEJA EDUKULLA 9219 FELDSPAR CREEK DR CYPRESS TX 77433 | | | | | |
| 7 Social security tips | | 8 Allocated tips | | 9 | |
| 10 Dependent care benefits | | 11 Nonqualified plans | | 12a Code | |
| 13 Statutory employee | | 14 Other | | 12b Code | |
| Retirement plan | | | | 12c Code | |
| Third-party sick pay | | | | 12d Code | |
| 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** Dept. of the Treasury -- IRS
This information is being furnished to the Internal Revenue Service.
DAA

| Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return. | | | 41-0852411 OMB No. 1545-0008 | | |
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| Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.) | | | 41-0852411 OMB No. 1545-0008 | | |
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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.
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