© Employer's name, address, and ZIP code EMINENCE IT SOLUTIONS, INC		ps, other compn 27605.04	Fed inc tax withheld 3494.00	3 Social security wages	Form <b>W-2</b>
EMINENCE IT SOLUTIONS, INC. 1135 KILDAIRE FARM RD	4 SS tax		Medicare wages & tips	6 Medicare tax withheld	Wage and
SUITE 311-3 CARY NC 27511	7 Socials	security tips 8	Allocated tips	9	Tax Statement
d Control number	10 Depdnt	care benefits 11	Nonqualified plans	2a	2023
e Employee's name, address, and ZIP code	Suff. 13	mployee.	Other	12b	
YOUSHITA GOUD PABATHI			1	2c	Copy B To Be Filed with Employee's FEDERAL
1000 BLOOM RD APT#1404   CARY		it plan	1		Tax Return This information is being furnished to the Internal Revenue Service.
15   State   Employer's state ID number   16   State wage   NC   600479587   2'	s, tips, etc 7605.04 Third-party		Local wages, tips, etc	19 Local income tax	20 Locality name
REV 12/19/23 QBDT					tment of the Treasury — IRS
76. 57.6050				4150	
a Employee's SSN 765-57-6058  c Employer's name, address, and ZIP code		yer identification numbers, other compn 2	` '	3 Social security wages	OMB No. 1545-0008
EMINENCE IT SOLUTIONS, INC.	2	7605.04	3494.00		Form W-2
1135 KILDAIRE FARM RD SUITE 311-3	4 SS tax		-	6 Medicare tax withheld	Wage and Tax
CARY NC 27511		, ,		9	Statement
d Control number	10 Depdn	at care benefits 11	Nonqualified plans 1	2a 	2023
<b>e</b> Employee's name, address, and ZIP code	Suff. 13	employee. 14	Other	12b	Copy 2 To Be
YOUSHITA GOUD PABATHI 1000 BLOOM RD APT#1404		ıt plan	1	12c	Filed With Employee's State,
CARY NC 27519			1	12d	City, or Local Income Tax Return.
15 State Employer's state ID No. NC   600479587   16 State wage	s, tips, etc 605.04 Third-party		Local wages, tips, etc	19 Local income tax	20 Locality name
					<del> </del>
<b>a</b> Employee's SSN 765-57-6058	<b>b</b> Emplo	yer identification numb	er (EIN) 20-0324	4158	OMB No. 1545-0008
C Employer's name, address, and ZIP code	This inform	ation is being furnished	. ,	uired to file a tax return, a ne ole and you fail to report it.	gligence penalty or
EMINENCE IT SOLUTIONS, INC.	0.	ps, other compn 2	Fed inc tax withheld 3494.00	3 Social security wages	Form <b>W-2</b>
1135 KILDAIRE FARM RD SUITE 311-3	4 SS tax	withheld 5	Medicare wages & tips	6 Medicare tax withheld	Wage and
CARY NC 27511  d Control No.	7 Social s	security tips 8	Allocated tips	9	Tax Statement
a contorno.	10 Depdnt	care benefits 11	Nonqualified plans 1	2a	2023
<b>e</b> Employee's name, address, and ZIP code	Suff. 13	memployee.	Other 1	2b	2023
YOUSHITA GOUD PABATHI 1000 BLOOM RD APT#1404	Retiremen			2c 	Copy C For EMPLOYEE'S RECORDS. (See Notice to
CARY NC 27519	Third-party	y sick pay	1	2d	Èmployee.)
15   State   Employer's state ID No.   16   State wage   NC   600479587   27		ome tax 1051.00 18	Local wages, tips, etc	19 Local income tax	<b>20</b> Locality name

**b** Employer identification number (EIN)

20-0324158

OMB No. 1545-0008

**a** Employee's SSN 765-57-6058