Copy B—To Be Filed Wi	th Employee's	OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 4000.00	2 Federal income tax withheld 113.00
759-17-7069	3 Social security wages	4 Social security tax withheld
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld
47-1729855	3 Medicale wages and tips	o Medicare tax withheid
c Employer's name, address, a	and ZIP code	
DATAQUAD INC 2000 S DAIRY ASI SUITE 405 HOUSTON, TX 77	HFORD ROAD 077-5727	
d Control number		
e Employee's name, address,		
MANOHAR REDDY Y 2441 CARRILL AL DENTON, TX 762	LAGO DRIVE	
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee 14 Oth	er	12b Code
Retirement plan		12c Code
Third-party sick pay		12d Code
15 State Employer's state ID nu	mber 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 Sta This information is being furnished		Dept. of the Treasury - IRS
		A -
Copy C-For EMPLOYE	E'S RECORDS (See	OMP No. 4545,0000

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld
	4000.00	113.00
759-17-7069	3 Social security wages	4 Social security tax withheld
b Employer ID number (EIN)		
	5 Medicare wages and tips	6 Medicare tax withheld
47-1729855		
c Employer's name, address,	and ZIP code	
DATAQUAD INC		
2000 S DAIRY AS	SHFORD ROAD	
SUITE 405		
HOUSTON, TX 77	7077-5727	
	3,2,	
d Control number		
10252		
e Employee's name, address	and ZIP code	
MANOHAR REDDY		
2441 CARRILL AI		
DENTON, TX 762		
DENION, IX /02	20 /	
7 Social security tips	8 Allocated tips	9
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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
a party olon pay		1.22 5300
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15 State Employer's state ID n	umber 16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name
3		
Form W-2 Wage and Tay St	atement 2022	Dent of the Treasury - IRS

Notice to Employee on the back of Copy B.)		OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 4000.00	2 Federal income tax withheld 113.00
759-17-7069	3 Social security wages	4 Social security tax withheld
b Employer ID number (EIN)		
	5 Medicare wages and tips	6 Medicare tax withheld
47-1729855		
c Employer's name, address, a	and ZIP code	
DATAQUAD INC		
	HFORD ROAD	
SUITE 405		
HOUSTON, TX 77	077-5727	
10 11		
d Control number		
10252	and ZID and	
e Employee's name, address,		
MANOHAR REDDY Y 2441 CARRILL AL		
DENTON, TX 762	<i>J 1</i>	
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
40.04-4-4		40h Oada
13 Statutory employee 14 Oth	er	12b Code
Retirement plan		12c Code
Hetirement plan		12C Gode
Third-party sick pay		12d Code
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15 State Emplover's state ID nu	mber 16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name
3 , 1 ,		1
Form W-2 Wage and Tax Sta	tement 2023	Dept. of the Treasury - IRS
	to the IRS. If you are required to file apposed on you if this income is tax	
enaity or other sanction may be ii	nposea on you if this income is tax	able and you fall to report it.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 4000.00	2 Federal income tax withheld 113.00
759-17-7069 b Employer ID number (EIN)	3 Social security wages	4 Social security tax withheld
47-1729855	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address, DATAQUAD INC 2000 S DAIRY AS SUITE 405		
d Control number 10252		
e Employee's name, address, MANOHAR REDDY Y 2441 CARRILL AL DENTON, TX 762	ANALA LAGO DRIVE	
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 nu	mber 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

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