Copy B-To Be Filed Wit Federal Tax Return.	41-0852411 OMB No. 1545-0008						
a Employee's soc. sec. no.	1 Wages, tips, other comp. 49340.00	2 Federal income tax withheld 5799.25					
XXX-XX-0388	3 Social security wages	4 Social security tax withheld					
b Employer ID number (EIN)	49340.00	3059.08					
	5 Medicare wages and tips	6 Medicare tax withheld					
84-4051565	49340.00	715.43					
c Employer's name, address, a	and ZIP code						
SANAV TECHNOLOGIES LLC 2967 100TH ST #7							
URBANDALE	IA	50322					
d Control number							
e Employee's name, address,	and ZIP code	Suff.					
RAJIYA BEGAM SHAIK 1549 LANCASHIRE CT APT C							
INDIANAPOLIS IN 46260							
7 Social security tips	8 Allocated tips	9					
10 Dependent care benefits	11 Nonqualified plans	12a Code					
13 Statutory employee 14 Oth	er	12b Code					
Retirement plan	12c Code						
Third-party sick pay		12d Code					
IN 0006983574 000	9340.00	1554.21					
15 State Employer's state ID n	17 State income tax						
18 Local wages, tips, etc.	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.							

Copy 2-To Be Filed With City, or Local Income Ta	n Employee's S ax Return.	State,	41-0852411 OMB No. 1545-0008		
a Employee's soc. sec. no.	1 Wages, tips, ot	her comp. 9340.00	2 Federal income tax withheld 5799.25		
XXX-XX-0388	3 Social security		4 Social security tax withheld		
b Employer ID number (EIN)		9340.00	3059.08		
2 Employor 12 Hambor (Emy)	5 Medicare wage		6 Medicare tax withheld		
84-4051565		9340.00	715.43		
c Employer's name, address, a	and ZIP code				
SANAV TECHNOL 2967 100TH ST #7					
2907 100111 31 #7					
URBANDALE		IA	50322		
d Control number					
e Employee's name, address,	and ZIP code		Su	uff.	
RAJIYA BEGAM 1549 LANCASHIRE INDIANAPOLIS	SHAIK CT APT C	IN	46260		
7 Social security tips	8 Allocated tips		9		
10 Dependent care benefits	11 Nonqualified p	lans	12a Code		
13 Statutory employee 14 Oth	er		12b Code		
Retirement plan			12c Code		
Third-party sick pay			12d Code		
IN 0006983574 00	0	49340.00	1554.21		
15 State Employer's state ID n	umber 16 State wa	ages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 Local income		20 Locality name		
Form W-2 Wage and Tax Stat	ement	2023	Dept. of the Treasury IR	s	

Copy C-For EMPLOYEE'S RECORDS (See 41-0852411 Notice to Employee on the back of Copy B.) OMB No. 1545-0008							
a Employee's soc. sec. no.	1 W	ages, tips, other comp. 49340.00	2	2 Federal income tax withheld 5799.25 4 Social security tax withheld			
7000700000	3 Sc	ocial security wages	4				
b Employer ID number (EIN)		49340.00		3059.08			
	5 Me	edicare wages and tips	6	Medicare tax withheld			
84-4051565		49340.00		715.43			
c Employer's name, address	and ZIF	ocode code			_		
SANAV TECHNO 2967 100TH ST #		ES LLC					
URBANDALE		IA		50322			
d Control number 32							
e Employee's name, address	, and ZI	P code		Sut	f.		
RAJIYA BEGAM SHAIK 1549 LANCASHIRE CT APT C							
INDIANAPOLIS IN 46260							
7 Social security tips	8 A	8 Allocated tips 9					
10 Dependent care benefits	11 N	11 Nonqualified plans 12a Code					
13 Statutory employee 14 C	ther		12b Code				
Retirement plan			12c Code				
Third-party sick pay			12d Code				
IN 0006983574 0	00	49340.00		1554.21	_		
15 State Employer's state ID number 16 State wages, tips, etc. 17 State income t							
15 State Employer's state ID	number	116 State wages, tips. etc.		117 State income tax			

Copy 2-To Be Filed With Employee's State, 41-0852411 City, or Local Income Tax Return. 41-0852411 OMB No. 1545-0008									
a Emp	oloyee's soc. sec.			ages, tips, other 493			2 Federal income tax withheld 5799.25		
XXX-XX-0388						4 Socia	4 Social security tax withheld		
b Emp	loyer ID number	(EIN)	49340.00		3059.08				
	1 3/3			5 Medicare wages and tips			6 Medicare tax withheld		
	<u>051565</u>				40.00		7	<u> 15.43</u>	
	loyer's name, ad								
	NAV TECH 67 100TH S		GIE	S LLC					
URBANDALE					IA		50322		
d Con	trol number	32							
e Emp	e Employee's name, address, and ZIP code Suff.						Suff.		
RAJIYA BEGAM SHAIK 1549 LANCASHIRE CT APT C									
INDIANAPOLIS			IN			46260			
7 Soci	7 Social security tips			8 Allocated tips			9		
10 Dependent care benefits			11 Nonqualified plans			12a Code			
13 Statutory employee 14 Othe			r		12b Code				
Retirement plan					12c Code				
Third-party sick pay					12d Code				
IN	IN 0006983574 000		49	49340.00		15	54.21		
15 State Employer's state ID nur			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

2023

Dept. of the Treasury -- IRS

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