	a Employee's social security numb	ber						
22222	892-92-0714	OMB No. 1545-0008						
b Employer identification number (EIN)			1 Wages, tips, other compensation 2 Federal income tax wi			ax withheld		
47-1112680				30250.00 4397				
c Employer's name, address, and ZIP code			3 So	3 Social security wages 4 Social security tax withhe				
ANYA HOLDINGS LLC							1875.50	
164 N MAIN ST			5 Me	5 Medicare wages and tips 6 Medicare tax withheld				
			30250.00			438.63		
PLYMOUTH, MI 481701236				7 Social security tips 8 Allocated tips				
d Control number			9	9 10 Dependent care benefits			benefits	
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 12a					
PURUSHOTHAM KANIKAHALLI MASH					o d e			
			13 Statutory Retirement Third-party employee plan sick pay					
517 North Shipley Street					e			
Unit 124			14 Oth	er	12c	I		
					ੂ 12d			
Wilmington, DE 198012213						I		
f Employee's address and ZIP cod	de				e			
15 State Employer's state ID numb	ber 16 State wages, tips,	etc. 17 State inco	ne tax	18 Local wages, tips, etc.	19 Loc	al income tax	20 Locality name	
DE 1-471112680-001	30250.00	0 1	637.47	30250.00		378.14	WILMI	
Form W-2 Wage an	d Tax Statement	201	23	Department of	of the Tre	easury-Internal	Revenue Service	

Copy 1-For State, City, or Local Tax Department

	a Employee's social security number 892-92-0714	OMB No. 154	15-0008	Safe, accurate, FAST! Use	rfil		e IRS website at s.gov/efile	
b Employer identification number (EIN) 47-1112680			1 Wag	ges, tips, other compensation 30250.00	2 Fe	2 Federal income tax withheld 4397.64		
c Employer's name, address, and ZIP code ANYA HOLDINGS LLC			3 Soc	cial security wages 30250.00	4 S	4 Social security tax withheld 1875.50		
164 N MAIN ST			5 Me	Medicare wages and tips 6 Medicare tax withheld 30250.00 438.			nheld 438.63	
PLYMOUTH, MI 481701236				cial security tips	8 AI	8 Allocated tips		
d Control number			9	10 Dependent care benefits			benefits	
e Employee's first name and initial Last name Suff			11 Nonqualified plans 12a See instructions for bo			for box 12		
PURUSHOTHAM KANIKAHALLI MASH			13 Statutory Retirement Third-party demonstration for the state of the					
517 North Shipley Street								
Unit 124			14 Other 12c					
Wilmington, DE 198012213					12d			
f Employee's address and ZIP coc	de				-		_	
15 State Employer's state ID numb DE 1-471112680-001	ber 16 State wages, tips, etc 30250.00		ne tax 637.47	18 Local wages, tips, etc. 30250.00	19 Loca	l income tax 378.14	20 Locality name WILMI	
were were and Tax Statement 2023 Department of the Treasury-Internal Revenue					Revenue Service			

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

Copy B-To Be Filed With Employee's FEDERAL Tax Return.

This information is being furnished to the Internal Revenue Service.

	a Employee's social security number 892-92-0714	are required to file a tax return, a pogligance ponalty or other canotion					
b Employer identification number (EIN)			1 Wag	Nages, tips, other compensation 2 Federal income tax withheld			
47-1112680				30250.00 4397.			
c Employer's name, address, and	ZIP code		3 So	cial security wages 4 Social security tax withheld			
ANYA HOLDINGS LLC				30250.00		1875.50	
164 N MAIN ST			5 Me	Medicare wages and tips 6 Medicare tax withheld 30250.00 438.63			
PLYMOUTH, MI 481701236				cial security tips 8 Allocated tips			
d Control number			9	10 Dependent care benefits			
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 12a See instructions for box			for box 12	
PURUSHOTHAM KANIKAHALLI MASH					o d e		
RANIKA IALLI MASI			13 Stati emp	utory Retirement Third-party loyee plan sick pay	12b		
517 North Shipley Street							
			14 Other 12c				
Unit 124					o d e		
Wilmington, DE 198012213					12d		
					o d e		
f Employee's address and ZIP coo						1	
15 State Employer's state ID numb	8,1,			18 Local wages, tips, etc.		20 Locality name	
DE 1-471112680-001	30250.00	1	637.47	30250.00	378.14	WILMI	
Form W-2 Wage and Tax Statement 2023 Copy C-For EMPLOYEE'S RECORDS Department of the Treasury-Internal Revenue Service Safe, accurate, FAST! Use							

Copy C-For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)

	a Employee's social security number						
	892-92-0714	OMB No. 1545-0008					
b Employer identification number (EIN)			1 Wa	ages, tips, other compensation 2 Federal income tax withhele			ax withheld
47-1112680				30250.00 4397			4397.64
c Employer's name, address, and	ZIP code		3 Soc	Social security wages 4 Social security tax withheld			
ANYA HOLDINGS LLC				30250.00 18			1875.50
164 N MAIN ST			5 Me	5 Medicare wages and tips 6 Medicare tax withheld			nheld
				30250.00	438.63		
			7 Soc	cial security tips	8 Allocated tips		
PLYMOUTH, MI 481701236							
d Control number			9	9 10 Dependent care benef			penefits
e Employee's first name and initial Last name Suff.			11 Nonqualified plans 12a				
PURUSHOTHAM	KANIKAHALLI MASH		d e				
			13 Statutory Retirement Third-party plan Sick pay C				
517 North Shipley Street					o d e		
Unit 124			14 Other 12c				
0111124					o d e		
Wilmington, DE 198012213					12d		
_					o d e		
f Employee's address and ZIP cod	le						
15 State Employer's state ID numb		. 17 State incor	ne tax	18 Local wages, tips, etc.	19 Loca		20 Locality name
DE 1-471112680-001	30250.00	1	637.47	30250.00		378.14	WILMI
				Department of the Treasury—Internal Revenue Service			
Form W-2 Wage and Tax Statement				2 opa. inone c			

Form **W-2** Wage and Tax Statement Copy 2-To Be Filed With Employee's State, City, or Local

Income Tax Return