Copy B-To Be Filed Wit Federal Tax Return.	41-0852411 OMB No. 1545-0008				
a Employee's soc. sec. no.		ages, tips, other comp. 15000.00	2 Federal income tax withheld 1015.85		
	3 Sc	ocial security wages	4 Social security tax withheld		
b Employer ID number (EIN)		edicare wages and tips	6 Medicare tax withheld		
<u>20-4268567</u>					
c Employer's name, address,					
HORIZON SOFTE 637 E BIG BEAVE	- ,				
TROY	48083				
d Control number					
e Employee's name, address,	and Z	P code	Suf		
KAMALAKAR RED 300 NORTHPOINT					
ELKHART IN			46514		
7 Social security tips	8 Al	located tips	9		
10 Dependent care benefits	11 N	lonqualified plans	12a Code		
13 Statutory employee 14 Otl	12b Code				
Retirement plan	12c Code				
Third-party sick pay	12d Code				
IN 0161091407 00	1	15000.00	378.00		
15 State Employer's state ID n	umber	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 L	ocal income tax	20 Locality name		
15000.00)	300.00	ELKHART COUNTY		
Form W-2 Wage and Tax Sta		2023	Dept. of the Treasury IRS		

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service.

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Copy C-For EMPLOYEE'S Notice to Employee on the	41-0852411 OMB No. 1545-0008								
a Employee's soc. sec. no.	1 Wages, tips, of	ther comp.	2 Federal income tax withheld						
XXX-XX-3051	15000.00 3 Social security wages		1015.85 4 Social security tax withheld						
b Employer ID number (EIN)	3 Godiai Security	wages	4 Social Security tax withheld						
(,	5 Medicare wage	s and tips	6 Medicare tax withheld						
20-4268567									
c Employer's name, address, and ZIP code									
HORIZON SOFTECH, INC. 637 E BIG BEAVER RD, SUITE 101									
TROY		MI	48083						
d Control number 50									
e Employee's name, address, and ZIP code Suff.									
KAMALAKAR REDDY SINGI 300 NORTHPOINTE BLVD									
		IN	46514						
300 NORTHPOINTE		IN	46514						
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300 NORTHPOINTE ELKHART 7 Social security tips	8 Allocated tips		9						
300 NORTHPOINTE ELKHART 7 Social security tips 10 Dependent care benefits	8 Allocated tips		9 12a Code						
300 NORTHPOINTE ELKHART 7 Social security tips 10 Dependent care benefits 13 Statutory employee 14 Other	8 Allocated tips		9 12a Code 12b Code						
300 NORTHPOINTE ELKHART 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan	8 Allocated tips		9 12a Code 12b Code 12c Code						
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300 NORTHPOINTE ELKHART 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan Third-party sick pay IN 0161091407 001	8 Allocated tips 11 Nonqualified p	15000.00 ages, tips, etc.	9 12a Code 12b Code 12c Code 12d Code 378.00						

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return. 41-0852411 OMB No. 1545-0008 1 Wages, tips, other comp. 15000.00 2 Federal income tax withheld 1015.85 a Employee's soc. sec. no. XXX-XX-3051 3 Social security wages 4 Social security tax withheld b Employer ID number (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 20-4268567 c Employer's name, address, and ZIP code HORIZON SOFTECH, INC. 637 E BIG BEAVER RD, SUITE 101 48083 **TROY** MΙ d Control number 50 e Employee's name, address, and ZIP code Suff. KAMALAKAR REDDY SINGI 300 NORTHPOINTE BLVD **ELKHART** IN 46514 7 Social security tips 8 Allocated tips 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 0161091407 001 15000.00 378.00 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 19 Local income tax 20 Locality name 18 Local wages, tips, etc. 15000.00 300.00 ELKHART COUNTY

2023

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Copy City.	2-To Be File or Local Inco		41-0852411 OMB No. 1545-0008					
a Emp	loyee's soc. sec.		1 Wages, tips, other comp. 15000.00		2 Federal income tax withheld 1015.85			
XXX-XX-3051				4 Social security tax withheld				
o Emp	loyer ID number	(EIN)						
20-4268567		5 Medicare wages and tips		61	Medicare tax withheld			
	loyer's name, ad	dress, ar	nd ZIF	ocode code	_			
HC 63	RIZON SO 7 E BIG BE	FTEC AVER	H, I RD	NC.), SUITE 101				
TR	OY			MI		48083		
d Con	trol number							
		50			_			
e Employee's name, address, and ZIP code Suff.								
KAMALAKAR REDDY SINGI 300 NORTHPOINTE BLVD								
EL	KHART			IN		46514		
7 Social security tips			8 Allocated tips					
0 Dependent care benefits 1			11 Nonqualified plans		12a Code			
3 Statutory employee 14 Other			12b Code					
Retirement plan				12c Code		2c Code		
Third-party sick pay			12d Code					
Ν	016109140	7 001		15000.00		378.00		
5 Stat	l e Employer's sta	te ID nur	nber	16 State wages, tips, etc.		17 State income tax		
8 Local wages, tips, etc. 19 Local income tax			ocal income tax	20	Locality name			
15000.00			300.00		ELKHART COUNTY			

Form W-2 Wage and Tax Statement

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