Copy B To Be F	iled with Employee's	2023 OMB No. 1545-0008	Copy 2 To Be Fi	led With Employee's State	2, 2023 OMB No. 1545-0008
a Employee's SSN		Prederal income tax withheld	a Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld
760-25-5528		13179.00 Social security tax withheld	760-25-5528	86487.10	13179.00 4 Social security tax withheld
b Employer ID no. (EIN)	86487.10	5362.20	b Employer ID no. (EIN)	86487.10	5362.20
30-0476265	5 Medicare wages and tips 86487.10	Medicare tax withheld 1254.06	30-0476265	5 Medicare wages and tips 86487.10	6 Medicare tax withheld 1254.06
c Employer's name, ad SANN IT SO	dress, and ZIP code DLUTIONS INC		c Employer's name, ad SANN IT SO		1
459 HERNDO SUITE 18 HERNDON	ON PARKWAY	VA 20170	459 HERNDO SUITE 18 HERNDON	ON PARKWAY	VA 20170
d Control number		20170	d Control number		201/0
e Employee's name, ac ALIMASTAN 19131 GAR. SAN ANTON:	SHAIK IBALDI WAY	Suff. TX 78259	e Employee's name, ac ALIMASTAN 19131 GARI SAN ANTONI	SHAIK BALDI WAY	Suff. TX 78259
7 Social security tips	8 Allocated tips	9	7 Social security tips	8 Allocated tips	9
10 Dependent care bene	fits 11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care bene	fits 11 Nonqualified plans	12a Code See inst. for box 12
13	14 Other	12b Code	13	14 Other	12b Code
Statutory employee		12c Code	Statutory employee		12c Code
Retirement Plan		12d Code	Retirement Plan		12d Code
Third-party sick pay		124 Gode	Third-party sick pay		124 Code
15 State Employer's s	tate ID number 16 State wages, tips	, etc. 17 State income tax	15 State Employer's state	e ID number 16 State wages, ti	ps, etc. 17 State income tax
18 Local wages, tips, etc	c. 19 Local income tax	20 Locality name	18 Local wages, tips, etc	2. 19 Local income tax	20 Locality name
Form W-2 Wage and Ta This information is being furni	x Statement shed to the Internal Revenue Service.	Dept. of the Treasury - IRS	Form W-2 Wage and Ta	x Statement	Dept. of the Treasury - IRS
This information is being furn	shed to the Internal Revenue Service. If you are	required to file a tay return, a negligence			

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

penalty or other sanction may					·			
Copy C For EMI			CORDS.	202				
(See Notice to E					B No. 1545-0008			
a Employee's SSN	1 Wages, tips, other comp.		2 Federal income tax withheld					
ECO OF FEOO	86487.10			13179.00				
760-25-5528	3 Social security wages		4 Social security tax withheld					
b Employer ID no. (EIN)	86487.10			5362.20				
. , , , ,	5 Medicare wages and tips			6 Medica	6 Medicare tax withheld			
30-0476265			86487.10		1254.06			
c Employer's name, address, and ZIP code SANN IT SOLUTIONS INC								
459 HERNDON PARKWAY SUITE 18 HERNDON VA 20170								
d Control number								
e Employee's name, address, and ZIP code ALIMASTAN SHAIK 19131 GARIBALDI WAY SAN ANTONIO TX 78259								
7 Social security tips	8 Allocated tips		9					
10 Dependent care bene	fits	11 Nonqua	alified plans	12a Code See inst. for box 12				
13	14 0	ther		12b Code				
Statutory employee								
				12c Co	12c Code			
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Third-party sick pay				120 00	ode			
I 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax								
18 Local wages, tips, etc. 19 Local income tax 20 Locality name								
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Form W-2 Wage and Tax Statement

REV 12/19/23 QBDT

Copy 2 To Be Filed with Employee's State, 2023								
City, or Local Inc					B No. 1545-0008			
a Employee's SSN	1 Wages, tips, other comp.			2 Federal income tax withheld				
	86487.10			13179.00				
760-25-5528	3 Soci	ial security wages		4 Social security tax withheld				
b Employer ID no. (EIN)	86487.10			5362.20				
	5 Medicare wages and tips			6 Medicare tax withheld				
30-0476265			86487.10	1254.06				
c Employer's name, ad SANN IT SO 459 HERNDO SUITE 18	OLUI	LIONS	INC					
HERNDON		VA 20170						
d Control number								
e Employee's name, ac ALIMASTAN	SHA	AIK			Suff.			
19131 GARIBALDI WAY								
SAN ANTON	IO			TX	78259			
7 Social security tips		8 Allocate	ed tips	9				
10 Dependent care bene	efits	11 Nonqua	alified plans	12a Code See inst. for box 12				
13	140	ther		12b Code				
Statutory employee								
Retirement Plan				12c Code				
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Third-party sick pay								
45.00	ın		16 State wages, tip		47.01.1			
15 State Employer's stat		17 State income tax						
18 Local wages, tips, etc	С.	19 Local income tax		20 Locality name				
Form W-2 Wage and Ta	x State	ment			Dept. of the Treasury - IRS			