### Form W-2 Wage and Tax Statement 2017

d Control number 0430-318P Void 0000000076-000000 b Employer's identification number   a Employee's social security number	c Employer's name, address, and ZIP code  SPARC TECHNOLOGIES INC  13921 PARK CENTER ROAD SUITE #	Department of the Treasury - Internal Revenue Serv OMB No. 1545-0008	vice
26-2268474 100-41-7871	HERNDON VA 20171	1 Wages, tips, other compensation 2 Federal income to 21477.28	2847.89
13 Satutory Retirement Third-party sick pay		3 Social security wages 4 Social security	
12 See Instrs. for Box 12 14 Other	e Employee's name, address, and ZIP code  INDU PRIYA KALAKUNTLA	5 Medicare wages and tips 6 Medicare tax w	withheld
1	1266 WATERFORD DRIVE COLUMBUS ON 43220	7 Social security tips 8 Allocated tips	
	COLUMBUS OH 43220	10 Dependent care benefits 11 Nonqualified	plans
		9 Verification Code	
		80ff-08b1-d4cb-1634	
15 State   Employer's state ID No. 16 State wag	es, tips, etc. 17 State income tax 18 Local wage	ges, tips, etc. 19 Local income tax 20 Locality r	name
ОН 53-020913 9 2	628.91		

This information is being turnished 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 fall to report it.

### Form W-2 Wage and Tax Statement 2017

#### Copy B, to be filed with employees FEDERAL tax return

Control num	(		318P 00076-00			name, address, and ZIP code ECHNOLOGIES INC		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
Employer's identification number 26 - 2268474   a Employee's social security number 100 - 41 - 7871			13921 PA	13921 PARK CENTER ROAD SUITE # HERNDON VA 20171			es, tips, other compensation 21477.28	2 Federal income tax withheld 2847.89				
3 Statutory employee	- 1	pla		Third-party sick pay				3 Soci	al security wages	4 Social security tax withheld		
2 See Instr	rs. for Bo	x 12	14 Other		1 ' '	name, address, and ZIP code		5 Med	care wages and tips	6 Medicare tax withheld		
				1266 WAT	INDU PRIYA KALAKUNTLA 1266 WATERFORD DRIVE COLUMBUS OH 43220			al security tips	8 Allocated tips			
					COLUMBUS	OH 43220		10 Dep	endent care benefits	11 Nonqualified plans		
									9 Verification Code 80ff-08b1-d4cb-1634			
	Employ 53-02		ite ID No. 9	16 State	e wages, tips, etc. 21477.28	17 State income tax 628.91	18 Local wages, tips,	etc.	19 Local income tax	20 Locality name		

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 fall to report it.

# Form W-2 Wage and Tax Statement 2017

#### Copy 2, to be filed with employees tax return for OH

d Control number		318P 000076-00000 a Employee's soci		c Employer's name, address, and ZIP code  SPARC TECHNOLOGIES INC  13921 PARK CENTER ROAD SUITE #				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
-	26-2268474 100-41-7871			HERNDON VA 20171			1 Wages, tips, other compensation 21477.28		2 Federal income tax withheld 2847.89	
13 Statutory employee	płan	1	Third-party sick pay				3 Social	security wages	4 Social security tax withheld	
12 See Instrs. fo	Box 12	14 Other			name, address, and ZIP code		5 Medic	are wages and tips	6 Medicare tax withheld	
				INDU PRIYA KALAKUNTLA 1266 WATERFORD DRIVE			7 Social	security tips	8 Allocated tips	
				COLUMBUS	COLUMBUS OH 43220			ndent care benefits	11 Nonqualified plans	
							9 Verifi	cation Code		
15 State Emplo	yer's state	ID No.	16 State wag	es, tips, etc.	17 State income tax	18 Local wages, tips,	etc.	19 Local income tax	20 Locality name	
ОН 53-02	20913 9		2	628.91						

his 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 fall to report it.

# Form W-2 Wage and Tax Statement 2017

General Wage and 1		/			and the second second second			
d Control number  b Employer's identification number   a Employee	Void X 's social security number	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
13 Statutory Relieument				1 Wages	s, tips, other compensation	2 Federal income tax withheld		
employee plan	Third-party sick pay	<i>j</i> .		3 Social	security wages	4 Social security tax withheld		
12 See Instrs. for Box 12 14 Other		e Employee's name, address, and ZIP code		5 Medic	are wages and tips	6 Medicare tax withheld		
				7 Social	security tips	8 Allocated tips		
				10 Deper	ident care benefits	11 Nonqualified plans		
				9 Verifi	ication Code	1823		
15 State Employer's state ID No.	16 State wag	jes, tips, etc. 17 State income tax	18 Local wages, tips,	etc.	19 Local income tax	20 Locality name		

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 renort it