22222 Voi	/oid a Employee's social security number 119-81-4922			For Official Use Only ► OMB No. 1545-0008						
b Employer identification number (EIN)						1 Wag	es, tips, other compensation	2 Federal income tax withheld		
42-1720580							55028.00	7073.00		
c Employer's name, address, and ZIP code						<b>3</b> Soc	3 Social security wages 4 Social security tax withheld			x withheld
ESOLUTIONSFIRST, LLC										
						5 Me	dicare wages and tips	6 Medicare tax withheld		
12020 SUNRISE VALLEY DR STE 100										
SUITE 100						7 Social security tips		8 Allocated tips		
RESTON VA 20191-3429										
d Control number						9 Verification code		10 Dependent care benefits		
e Employee's first name and initial			Last name			11 Nonqualified plans		12a See instructions for box 12		
DINESH C			GUDAVARTI					o d e		
						13 Statu	rtory Retirement Third-party oyee plan sick pay	12b		
								o d e		
1221 CHASE HERITAGE CIR						14 Other		12c		
STERLING VA 20164								o d e		
								12d		
								0 d e		
f Employee's address and ZIP code										
15 State Employer's state ID number			16 State wages, tips, etc.	17 State income			18 Local wages, tips, etc.	19 Local inco	ome tax	20 Locality name
VA 30-421720	.720580F-001 55028.00 2		287	6.00						

wage and Tax Statement

5078

Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction
Act Notice, see the separate instructions.

Copy A For Social Security Administration — Send this entire page with

Form W-3 to the Social Security Administration; photocopies are  ${f not}$  acceptable. 0 0 0 0/ 1 0 3 0  ${f D}$