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OMB No. 1545-0008	3 Social sec	urity wages	4 Social security tax withheld		OMB No. 1545-0008	3 Social security wages		4 Social security tax withheld		
	5 Medicare	26,688.89 wages and tips	6 Medica	1,654.71 are tax withheld		5 Medicar	26,688.89 re wages and tips	6 Medica	1,654.71 re tax withheld	
C Employer's name.	. address, and	26,688.89 ZIP code		386.99 This information is being	C Employer's nam	e, address, a	26,688.89 nd ZIP code		386.99	
Denken Solutions Inc 9170 Irvine Center Dr Ste 200 Irvine, CA 926184614 Benken Solutions Inc 9170 Irvine Center Dr Ste 200 Irvine, CA 926184614					Denken Solutions Inc 9170 Irvine Center Dr Ste 200 Irvine, CA 926184614					
7 Social security tip		Allocated tips	9	,	7 Social security t		8 Allocated tips	.00		
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27-3050679 13 Statutory Retirem	ent Third-party	1	0431		13 Statutory Retirement Third-party employee plan sick pay					
employee plan										
e Employee's first n Srinivas Reddy 1429 W Lexing Chicago, IL 60		Suff.	e Employee's first name and initial Last name Suff. Srinivas Reddy Kammadhanam 1429 W Lexington St Chicago, IL 60607							
f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc.									16 State wages, tips, etc.	
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EMPLOYEE'S RECORDS (See Notice to					With Employ FEDERAL Ta	ee's	19 Local income tax	- 2	20 Locality name	
Employee on the back of Copy B.)					This information is being the Internal Revenue \$	ng furnished to				
	•	Department of the Tre	easury In	ternal Revenue Service			Department of the Tr	easury Int	ernal Revenue Service	
d Control number 1 Wages, tips, other compensation 0007002611 72,448.89 2 Federal income tax withheld 10,658.44					d Control number 1 Wages, tips, other compensation 2 Federal income tax withheld 10007002611 72,448.89 10,658.44					
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7 Social security tip		Allocated tips	9		7 Social security t		8 Allocated tips	9		
10 Dependent care	.00 benefits 1	1 Nonqualified plans		2a _	10 Dependent car		11 Nonqualified plans		2a	
⁰ 12b ,	.00	12c ,	.00 E	12d .	୍ଦି 12b ,	.00	ີ (12c ຸ	.00 g	2d ,	
b Employer identifi	ication numbe	r (EIN) a Employee	's social se	curity number	b Employer ident	ification numb	ge per (EIN) a Employee	s's social sec	curity number	
27-3050679	868-43-	,	27-3050679 868-43-8437 13 Statutory Retirement Third-party 14 Other							
13 Statutory Retirement Third-party sick pay					employee plan sick pay					
e Employee's first name and initial Last name Suff. Srinivas Reddy Kammadhanam 1429 W Lexington St Chicago, IL 60607					Employee's first name and initial Last name Suff. Srinivas Reddy Kammadhanam 1429 W Lexington St Chicago, IL 60607					
f Employee's addres		46.0	f Employee's address and ZIP code							
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With Employee's State, City, or Local Income Tax Return 19 Local income tax 20 Locality name				20 Locality name	With Employ State, City, o	ee's	19 Local income tax	1	20 Locality name	
				Income Tax Return						
Department of the Treasury Internal Revenue Service							Department of the Treasury Internal Revenue Service			

Denken Solutions Inc 9170 Irvine Center Dr Ste 200 Irvine, CA 926184614